FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL						
	OMB Number:	3235-0287						
	Estimated average burden							
l	hours per response:	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol SKYWORKS SOLUTIONS, INC. [SWKS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
ALDRICH DAVID J						<u> </u>									X	Director		10%	Owner	
(Last)	(Fir	sst) (I	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/04/2011									X	Officer (give title below) Presiden		Othe belo t and CEO	er (specify w)	
(Street) WOBUR (City))1801 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									3. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	efici	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date						Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4					5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount		(A) or (D)	Pric	Trans		action(s) 3 and 4)		(111511.4)		
Common	/2011	011			A		95,833 ⁽	1)	A	\$0	.00 3		78,473	D						
Common	ommon Stock 11/04/2						011		F		40,011	2)	D	\$2	\$21.83		8,728(3)	D		
Common Stock														1		⁷ ,724 ⁽⁴⁾	I	By 401(k) plan		
		Та									sed of, onvertib					vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transa Code (8)	Instr.	of Deriv Secu Acqu (A) of Dispo	rities ired r osed) : 3, 4	6. Date Exerci Expiration Dar (Month/Day/You Date Exercisable		e	Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Number of Security (Instr. and 4)		ount	Derivative Security (Instr. 5) Bene Own Follo Repo		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. Represents 95,833 shares of common stock issued to the Reporting Person pursuant to a performance share award dated November 4, 2008. Such performance share award contained both a continued employment condition and a performance condition related to the achievement by the Issuer of certain pre-established performance metrics for fiscal year 2009.
- 2. Transfer of stock to the Issuer of the number of common shares determined to be sufficient to satisfy tax withholding obligations related to the issuance of Common Stock on 11/4/11.
- 3. This total includes 266 shares purchased on 07/29/11 through the Skyworks Solutions, Inc. Employee Stock Purchase Plan.
- 4. This total represents the number of shares of common stock held by the Reporting Person in the Issuer's 401(k) plan. The information in this report is based on the latest plan statement dated 10/31/11.

Remarks:

Robert J. Terry, as Attorney-in-Fact for David J. Aldrich

11/08/2011

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.