FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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

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Name and Address of Reporting Person*  LEVAN GEORGE						2. Issuer Name <b>and</b> Ticker or Trading Symbol SKYWORKS SOLUTIONS, INC. [ SWKS ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
EL VIII GLORGE																			·
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 05/29/2012								X	below)	(give title ) /P, Human Res		Other (specify below)	
20 SYLVAN ROAD																			
(Street)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
WOBURN MA 01801														X	X Form filed by One Reporting Person				
(City)	y) (State) (Zip)				-									Form filed by More than One Reporting Person					
(City)	(5	iale)	(ZIP)																
		Tab	le I - No	n-Deri	vativ	e Sec	curit	ies Ac	quired	, Dis	sposed o	f, or Be	neficia	lly C	Owned				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Execution Date,			3. Transa Code (I 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owned Following Reported		Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Transaction/c		tion(s)			Instr. 4)
Common Stock 05/29/2						012			М		10,500	A	\$12.0	)7	80,716			D	
Common Stock 05/29/2					9/2012				S		10,500	D	\$26.3	5.38 <sup>(1)</sup> 70,216			D		
Common Stock													15,2		207 <sup>(2)</sup>		I 4	By 401(k) plan	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  (e.g., puts, calls, warrants, options, convertible securities)															<u> </u>				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	ed Date,	d 4. Date, Transa Code (		5. Number		•	xerci on Dat	sable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (Right to Buy)	\$12.07	05/29/2012			М			10,500	(3)		11/10/2016	Common Stock	10,500	) :	\$0.00	21,000	0	D	

## **Explanation of Responses:**

- 1. The price reflects the average selling price of the shares sold. Actual sale prices ranged from \$26.38 per share to \$26.38 per share.
- 2. This total represents the number of shares of common stock held by the Reporting Person in the Skyworks 401(k) plan as of the most recent plan statement dated 04/30/2012.
- 3. Stock option granted under the Issuer's 2005 Long-Term Incentive Plan. The stock option vests in four (4) equal installments, beginning on 11/10/2010 and ending on 11/10/2013.

## Remarks:

Robert J. Terry, as Attorney-in-Fact for George M. LeVan

\*\* Signature of Reporting Person

05/31/2012

Date

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

- $^{\star}$  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.