#### 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 Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

Name and Address of Reporting Person*     ALDRICH DAVID J						2. Issuer Name <b>and</b> Ticker or Trading Symbol SKYWORKS SOLUTIONS, INC. [ SWKS ]								Relationship leck all appl X Direct	icable)	,			
(Last) 20 SYLV	(Fi	ŕ	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/05/2018								Office below	r (give title )		Other (s below)	pecify	
(Street) WOBUR			01801		_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								e) X Form Form	ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(S		(Zip)	n Doris	vativo	. Soc	urit	ios Ao	auirod		cnocod o	of or Bo	noficial	ly Owno					
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day			ction	tion 2A. Exe y/Year) if a		2A. Deemed Execution Date, If any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a		5. Amor Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			Instr. 4)	
Common Stock 10/05/2				/2018	018			M <sup>(1)</sup>		5,500	A	\$25.2	5 14	147,752		D			
Common Stock 10/05			10/05/	2018				S <sup>(1)</sup>		5,500	D	\$90.48	(2) 14	2,252		D			
Common Stock													19,	943 <sup>(3)</sup>		I	By 401(k) plan		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/E	n Date,	Code (Ir		of Deri Sec Acq (A) ( Disp of (I	oosed D) tr. 3, 4	6. Date Exc Expiration (Month/Da		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (right to buy)	\$25.25	10/05/2018			M <sup>(1)</sup>			5,500	(4)		11/07/2020	Common Stock	5,500	\$0.00	4,999		D		

# **Explanation of Responses:**

- 1. This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on 6/8/2018.
- 2. The price reflects the average selling price of the shares sold. Actual sale prices ranged from \$90.01 per share to \$90.82 per share.
- 3. This total represents the number of shares of common stock held by the Reporting Person in the Skyworks Solutions, Inc. 401(k) plan based on the latest plan statement dated 9/30/2018.
- $4. \ This stock option vested in four (4) equal installments, beginning on 11/7/2014 and ending on 11/7/2017.$

## Remarks:

Daniel L. Ricks, as Attorney-In-Fact for David J. Aldrich

10/05/2018

\*\* 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.