FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	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 3235-0287 Estimated average burden hours per response: 0.5

Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(6). 3	ee instruction i	0.																		
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)							
BORI CARLOS S					1									Director				10% Owner		
(Last) (First) (Middle)						J								1	Officer (give title below)			Other (specify below)		
(Last)	,	,	viidale	;)		3. Date of Earliest Transaction (Month/Day/Year)								SVP, Sales & Marketing						
5260 CALIFORNIA AVENUE					09/13/2024													_		
	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable										
(Street)			2615											Line)						
IRVINE	IRVINE CA 92617													Form filed by One Reporting Person						
														Form filed by More than One Reporting Person						
(City)	(St	ate) (Z	Zip)																	
		Table	I - N	lon-Deriva	tive	Secui	rities	Ac	quire	d, Di	sposed o	f, or E	Benefic	ially	Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y				Year)	Execution Date,					Acquired (A) or (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Transa	ansaction(s) str. 3 and 4)			(Instr. 4)	
Common Stock 09/13/202					24				S ⁽¹⁾		9,321	D	\$101.9	7 ⁽²⁾	7(2) 37,203(3)			D		
																			Dec	
Common Stock												1.734(4)				By 401(k)				
Common Stock															1,	,734~			plan	
															pian					
		Tal	ble II	l - Derivati											Owne	d				
				(e.g., pu	ıts, ca	alls, v	varra	ants	, opt	ions,	convertib	ole se	curities	s)						
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expi	ate Exei iration I nth/Day		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der	Price of crivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer) rcisable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on 6/10/2024.
- 2. The price reflects the average selling price of the shares sold. Actual sale prices ranged from \$101.47 per share to \$102.42 per share.
- 3. This total includes 219 shares purchased on 1/31/2024 through the Skyworks Solutions, Inc. 2002 Employee Stock Purchase Plan.
- 4. 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 8/31/2024.

Remarks:

Ashran Jen, as Attorney-In-Fact for Carlos S. Bori

09/13/2024

Date

** Signature of Reporting Person

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.