SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 OMB APPROVAL
OMB Number: 3235-0287
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hours per response: 0.5

I. Nume and Address of Reporting reison			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>SKYWORKS SOLUTIONS, INC.</u> [ SWKS ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner
(Last) 20 SYLVAN I	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/28/2019	Officer (give title Other (specify below) below)
(Street) WOBURN	МА	01801	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person Form filed by More than One Reporting Person
(City)	(State)	(Zip)		

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction	2A. Deemed	3.		4. Securities	Acquired	(A) or	5. Amount of	6. Ownership	7. Nature
	Date (Month/Day/Year)	Execution Date, if any	Transaction Code (Instr.		Disposed Of (D) (Instr. 3, 4 and			Securities Beneficially Owned Following	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	06/28/2019		M <sup>(1)</sup>		5,000	A	\$60.97	208,032	D	
Common Stock	06/28/2019		<b>S</b> <sup>(1)</sup>		5,000	D	\$77.49	203,032	D	
Common Stock								20,407 <sup>(2)</sup>	I	By 401(k) plan

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(*:9:,	<b>P</b> ,	•••••	,		, opuo							-
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Deri Sec Acq (A) o Disp of (E (Inst					Amount of		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option (right to buy)	\$60.97	06/28/2019		<b>M</b> <sup>(1)</sup>			5,000	(3)	05/09/2020	Common Stock	5,000	\$0.00	35,999	D	

Explanation of Responses:

1. This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on 2/12/2019.

2. 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 05/31/2019.

3. This stock option was originally scheduled to vest in four (4) equal installments, beginning on 11/10/2015 and ending on 11/10/2018. Pursuant to the Second Amended and Restated Change of Control/Severance Agreement between the Reporting Person and Skyworks Solutions, Inc., vesting of the unvested portion of this stock option was accelerated on 5/24/2018, in conjunction with the Reporting Person's cessation of employment.

Remarks:

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

06/28/2019

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.