SKYWORKS SOLUTIONS, INC.

Form 4

August 20, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB

Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

3235-0287 Number: January 31, Expires:

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subject to Section 16. Form 4 or Form 5

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response... 0.5

5. Relationship of Reporting Person(s) to

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

Name and Address of Reporting Person *

ALDRICH DAVID J			Symbol SKYWORKS SOLUTIONS, INC. [SWKS]				NC.	(Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)			X Director 10% OwnerX Officer (give title Other (specify below)				
20 SYLVAN ROAD			08/18/2015					Chairman and CEO		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check		
WOBURN,	MA 01801		Filed(Moi	nth/Day/Year)			Applicable Line) _X_ Form filed by 0 Form filed by N Person	One Reporting Pe More than One Re	
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	Execution any	ned 3. 4. Securities Acquire n Date, if Transaction(A) or Disposed of (I Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)		d of (D)	Securities Ownership Indirect Beneficially Form: Direct Beneformed (D) or Ownership Indirect Beneficially Form: Direct Beneficially Ownership Indirect Beneficially Form: Direct Beneficially Ownership Indirect Beneficially Form: Direct Beneficial Form: Direct Ben		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
_				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(msu. 4)	
Common Stock	08/18/2015			M <u>(1)</u>	1,516	A		132,633	D	
Common Stock	08/18/2015			S <u>(1)</u>	1,516	D	\$ 90.33 (2)	131,117	D	
Common Stock								18,974 <u>(3)</u>	I	By 401(k) plan

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

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displays a currently valid OMB control number.

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. Deemed Execution Date, if any (Month/Day/Year)	4. 5. Number Transaction Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 23.8	08/18/2015		M <u>(1)</u>	1,516	<u>(4)</u>	11/09/2017	Common Stock	1,516

Reporting Owners

Reporting Owner Name / Address	Relationships						
rg	Director	10% Owner	Officer	Other			
ALDRICH DAVID J 20 SYLVAN ROAD WOBURN, MA 01801	X		Chairman and CEO				

Signatures

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

Aldrich

08/20/2015

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on 5/4/2015.
- (2) The price reflects the average selling price of the shares sold. Actual sale prices ranged from \$90.00 per share to \$90.70 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 7/31/2015.
- (4) This stock option vested in four (4) equal installments, beginning on 11/9/2011 and ending on 11/9/2014.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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