INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> BORI CARLOS S			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol SKYWORKS SOLUTIONS, INC. [SWKS]			
(Last)	(First)	(Middle)	08/02/2017	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)
	(Street)			(Check all applicable) Director 10% Owner Officer Other			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person
IRVINE, CAÂ		, e		title below) (specify below) VP, Sales & Marketing			
(City)	(State)	(Zip)	Table I - N	Non-Derivat	ive Securiti	es Ber	neficially Owned
1.Title of Secu (Instr. 4)	rity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nati Owner (Instr.	*
Common St	ock		14,368		D	Â	
Common St	ock		847 (1)		Ι	By 40	01(k) plan
Reminder: Rep owned directly	-	ate line for ea	ch class of securities benefic	ially S	EC 1473 (7-02	2)	

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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

3235-0104

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Employee Stock Option (Right to Buy)	(2)	11/07/2020	Common Stock	2,000	\$ 25.25	D	Â
Employee Stock Option (Right to Buy)	(3)	11/10/2021	Common Stock	3,350	\$ 60.97	D	Â
Employee Stock Option (Right to Buy)	(4)	11/09/2022	Common Stock	5,191	\$ 84.89	D	Â
Employee Stock Option (Right to Buy)	(5)	11/09/2023	Common Stock	12,330	\$ 77.66	D	Â
Restricted Stock Units	(6)	(6)	Common Stock	3,605	\$ <u>(7)</u>	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
BORI CARLOS S 5221 CALIFORNIA AVENUE IRVINE, CAÂ	Â	Â	VP, Sales & Marketing	Â		
Signatures						

Daniel L. Ricks, as Attorney-In-Fact for Carlos S. Bori	08/11/2017	
**Signature of Reporting Person	Date	

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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 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 7/31/2017.
- (2) The stock option vests in four (4) equal installments, beginning on 11/7/2014 and ending on 11/7/2017.
- (3) The stock option vests in four (4) equal installments, beginning on 11/10/2015 and ending on 11/10/2018.
- (4) The stock option vests in four (4) equal installments, beginning on 11/9/2016 and ending on 11/9/2019.
- (5) The stock option vests in four (4) equal installments, beginning on 11/9/2017 and ending on 11/9/2020.
- (6) The restricted stock units vest in four (4) equal installments, beginning on 11/9/2017 and ending on 11/9/2020.
- (7) Each restricted stock unit represents the contingent right to receive one (1) share of common stock upon vesting of the unit.

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.