WATERS GREGORY L

Form 4 May 12, 2005

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

OMB Number:

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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 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * WATERS GREGORY L			2. Issuer Name and Ticker or Trading Symbol SKYWORKS SOLUTIONS INC [SWKS]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 20 SYLVAN		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/10/2005					Director 10% Owner Selection Other (specify below) UP, Cellular Systems				
WOBURN,	4. If Amendment, Date 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							
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acc	Person quired, Disposed o	of, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year		3.	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price			5. Amount of Securities Form: Direct Indirect Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported Transaction(s) (Instr. 3 and 4)					
Common Stock	05/10/2005			A	17,735 (1)	A	\$0	30,735 (2)	D			
Common Stock								2,469 (3)	Ι	By 401(k) plan		

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

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orNumber	Expiration Date		Amount	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								^	mount		
									mount		
						Date	Expiration Date	or Title Number of			
						Exercisable					
				C + V	(A) (D)						
				Code V	(A) (D)			S	hares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

WATERS GREGORY L 20 SYLVAN ROAD **WOBURN, MA 01801**

VP, Cellular Systems

Signatures

By: Robert J. Terry, Attorney-In-Fact

05/12/2005

**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).
- Restricted Stock granted under the Skyworks Solutions, Inc. 2005 Long-Term Incentive Plan. Stock vests in four (4) equal installments, beginning on May 10, 2006, and ending on May 10, 2009.
- This total includes 2,000 shares of common stock acquired by the reporting person pursuant to the Skyworks Solutions, Inc. Employee (2) Stock Purchase Plan since the last report, 1,000 shares of which were acquired during the fiscal year ended October 1, 2004, and 1,000 shares of which were acquired during the fiscal year ending September 30,2005.
- This total represents the number of shares of common stock held by the reporting person in the Skyworks Solutions, Inc. 401(k) plan. The information in this report is based on a plan statement dated 4/30/2005.

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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