FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* CREVISTON STEVEN E | | | | | | 2. Issuer Name and Ticker or Trading Symbol Qorvo, Inc. [QRVO] | | | | | | | | (Check | all app | olicable) | | Issuer Owner r (specify |
|--|---|---|--|------------------------------|--------|---|----|--|--|------------------------|---------------|----------------------------|-------------------------|-------------------------|---|---|--|-------------------------|
| (Last) (First) (Middle) C/O QORVO, INC. 7628 THORNDIKE RD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/12/2016 | | | | | | | | X | belov | below) below) VP and Pres. Mobile Products | | |
| (Street) GREENS (City) | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv Line) X | • | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y | | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a | | | | | and 5) Sec Ber Ow | | ount of ities icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | | | action(s) 3 and 4) | | (Instr. 4) | |
| Common Stock 08/12/20 | | | | | | | 16 | | S | | 41,250(1) | D | \$54.3 | \$54.379 ⁽²⁾ | | 31,690 | D | |
| Common Stock 08/15/20: | | | | | | 16 | | F | | 4,598 | D | \$55.77 | | 127,092 | | D | | |
| 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 | nversion Exercise (Month/Day/Year) ce of rivative curity Date (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) | | 4. Transa Code (8) | Instr. | Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | Amount or Number of Shares | nt er | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

- 1. The reporting person acquired these shares in a previously reported exercise and hold transaction on July 26, 2016.
- 2. The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$54.30 to \$54.52, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

/s/ Mark J. Murphy, by Power of Attorney

08/16/2016

** Signature of Reporting Person

Date

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.