FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Nashington, | D.C. | 20549 | |
|--------------|------|-------|--|
| wasiiiigton, | D.C. | 20343 | |

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
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| | OMB APPRO | OVAL |
|---|------------------------|-----------|
| | OMB Number: | 3235-0287 |
| l | Estimated average burd | en |
| l | 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* GIBSON C SCOTT | | | | | | 2. Issuer Name and Ticker or Trading Symbol Qorvo, Inc. [QRVO] | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|--|-----|------------------------------|---|-----------|---|-----|------|---|----------------------|---------------------|---|---|---|---|--|----------------|---------------|--|
| (Last) (First) (Middle) C/O QORVO, INC. | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/08/2017 | | | | | | | | | Officer below) | (give title | Other below | (specify) | |
| (Street) | SBORO N | C 2 | 27409 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | ne) X | • | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans. Date (Month/I | | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | 4 and Secur Benef | | es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | | Code | v | Amount | (| (A) or (D) | Price | Ti | Transaction(s) (Instr. 3 and 4) | | | (111341. 4) | |
| Common Stock 08/0 | | | | | 3/08/2017 | | | | A | | 2,762 | 2,762 A | | \$(| 10,405 | | D | | |
| | | Та | able II - D | | | | | | | | sed of, onvertib | | | | / Owr | ned | | | |
| 1. Title of Derivative Security (Instr. 3) | erivative Conversion Date Execution Date, Tecurity or Exercise (Month/Day/Year) if any | | 4. Transa Code (8) | ction of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | 8. Price Deriva Securi (Instr. ! | ttive d ty S 5) B C F R | 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) | | | |
| | | | | | Code | v | (A) | | Date Exercisab | | Expiration Date | Title | or Num of | ber | | | | | |

Explanation of Responses:

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

08/09/2017

** 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.