1. Name and Address of Reporting Person
   Sievers Kurt
   C/O NXP SEMICONDUCTORS N.V.
   HIGH TECH CAMPUS 60
   EINDHOVEN P7 5656AG

2. Issuer Name and Ticker or Trading Symbol
   NXP Semiconductors N.V. [NXPI]

3. Date of Earliest Transaction (Month/Day/Year)
   07/28/2020

4. If Amendment, Date of Original Filed
   (Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer
   (Check all applicable)
   X Director
   X Officer (give title below)
   CEO & President
   10% Owner
   Other (specify below)

6. Individual or Joint/Group Filing (Check Applicable Line)
   X Form filed by One Reporting Person
   Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>Code</th>
<th>Transaction Date (Month/Day/Year)</th>
<th>Deemed Execution Date, if any (Month/Day/Year)</th>
<th>Transaction Code (Instr. 8)</th>
<th>Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>07/28/2020</td>
<td>A</td>
<td>7,810</td>
<td>(1)</td>
<td>7,810</td>
<td>D</td>
<td>Restricted Stock Unit</td>
</tr>
</tbody>
</table>

Explanation of Responses:
1. Each Restricted Stock Unit represents the conditional right to receive one share of common stock.
2. The Restricted Stock Units vest in three equal annual installments on the anniversary of the 7/28/2020 grant date (subject to the terms of the reporting person's award agreement).

Remarks:

/s/ Kurt Sievers by Dr. Jean A.W. Schreurs under Power of Attorney
07/30/2020

** 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).


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.