SILICON LABORATORIES INC

Form 4 May 02, 2014

FORM 4

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

OMB Number: 3235-0287

5. Relationship of Reporting Person(s) to

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005 Estimated average

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

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

2. Issuer Name and Ticker or Trading

burden hours per response... 0.5

See Instruction

30(h) of the Investment Company Act of 1940

1(b).

par value

(Print or Type Responses)

1. Name and Address of Reporting Person *

IVESTER JONATHAN D			Symbol SILICON LABORATORIES INC [SLAB]				Issuer (Check all applicable)		
(Last) 400 W CES	(Last) (First) (Middle) 3. Date of (Month/E) (Month/E) 00 W CESAR CHAVEZ 05/01/2			ransaction			Director 10% Owner Selfont (give title Other (specify below) Sr VP, Strategic Operations		
			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		
AUSTIN, T	X 78701						Form filed by l Person	More than One Re	porting
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code	(A)		ed of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Indirect (I)	
Common			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Stock, \$0.0001 par value	05/01/2014		M	2,000	A	\$ 36.81	91,987 (1)	D	
Common Stock, \$0.0001	05/01/2014		S	2,000 (2)	D	\$ 45.25	89,987	D	

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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and An Underlying Sec (Instr. 3 and 4)	cι
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title 1	Ai or Ni of Sh
Non-Qualified Stock Option (right to buy)	\$ 36.81	05/01/2014		M	2,000	12/19/2006(3)	12/19/2015	Common Stock, \$0.0001 par value	2

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

IVESTER JONATHAN D 400 W CESAR CHAVEZ AUSTIN, TX 78701

Sr VP, Strategic Operations

Signatures

Jonathan D. Uvester 05/02/2014

**Signature of Date
Reporting Person

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).
- (1) Includes 200 shares purchased by Reporting Person through the Issuer's 2009 Employee Stock Purchase Plan on the most recent semi-annual purchase date.
- (2) Shares sold pursuant to Reporting Person's 10b5-1 Trading Plan.
- Option vests and becomes exercisable with respect to (i) twenty percent (20%) of the option shares upon the date exercisable and (ii) the
- (3) balance of the option shares in a series of forty-eight (48) successive monthly installments over the forty-eight (48) month period measured from the date exercisable.
- (4) Not applicable per instruction 4(c)(iii).

Reporting Owners 2

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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.