FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington,	D.C.	20549
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ton, D.C. 20549	OMB APPROVAL

OMB Number:	3235-0287
Estimated average burde	en
hours per response:	0.5
	Estimated average burde

10% Owner

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director

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

1. Name and Address of Reporting Person*

GAY GARY R

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

SILICON LABORATORIES INC [SLAB]

2. Issuer Name and Ticker or Trading Symbol

					-									\perp X		give title		Other (sp	pecify
(Last) 4635 BC	(F STON LAI	irst) NE	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/01/2005								below) below) Vice President						
(Street) AUSTIN	I T	x	78735		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person				
(City)	(S	itate)	(Zip)										Form filed by More than One Reporting Person						
		Та	ble I - Noi	n-Deri	vativ	re Se	curi	ties Ac	quired,	Dis	posed of	, or Be	enef	icially	Owned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Beneficia Owned Fo	s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Common Stock, \$0.0001 par value				1/20	1/2005					834(1)	A		\$1.25	49,0	32(2)		D	
Common Stock, \$0.0001 par value				11/0	01/2005				М		4,166(1)) A		\$15.1	53,	198	D		
Common Stock, \$0.0001 par value				11/0	/01/2005				S		5,000(3)			\$32	48,198		D		
			Table II -								osed of, o				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate,	4. Transaction Code (Instr. 8)		Derivative		6. Date Exercisa Expiration Date (Month/Day/Yea)	Amoun Securit Underly Derivat	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	OI No	umber		Transaction (Instr. 4)	on(s)		
Incentive Stock Option (right to buy)	\$1.25	11/01/2005			М			834 ⁽¹⁾	12/15/199	98 ⁽⁴⁾	12/15/2008	Commo Stock, \$0.000 par valu	1	834	\$0 ⁽⁵⁾	0		D	
Non- Qualified Stock Option (right to buy)	\$15.1	11/01/2005			M			4,166 ⁽¹⁾	10/16/200)2 ⁽⁶⁾	09/21/2011	Commo Stock, \$0.000 par valu	1 4	l,166	\$0 ⁽⁵⁾	23,000)	D	

Explanation of Responses:

- 1. Stock option exercise pursuant to reporting person's 10(b)5-1 plan.
- 2. Includes 200 shares acquired under the Silicon Laboratories Inc. employee stock purchase plan on October 31, 2005.
- 3. Shares sold pursuant to reporting person's 10(b)5-1 plan.
- 4. This option is immediately exercisable and vests in a series of thirty-six (36) successive equal monthly installments beginning October 16, 2002.
- 6. This option becomes exercisable as it vests in a series of thirty-six (36) successive equal monthly installments beginning October 16, 2002.

11/02/2005 Gary R. Gay

** 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.