FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OIVIB AF	PROVAL
OMB Number:	3235-028
Estimated averag	e burden

0.5

hours per response

5. Relationship of Reporting Person(s) to Issuer

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

2. Issuer Name and Ticker or Trading Symbol

1. Name and Address of Reporting Person* Walsh Paul V Jr						2. Issuer Name and Ticker or Trading Symbol SILICON LABORATORIES INC [SLAB]								heck all appl Direct	ationship of Reporting k all applicable) Director		10% O	ner	
(Last) (First) (Middle) 400 W CESAR CHAVEZ				3. Date of Earliest Transaction (Month/Day/Year) 10/25/2007									^ below	Officer (give title below) VP Principal Ac		Other (s below) nting Office	·		
(Street) AUSTIN (City)		X tate)	78701 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								ne) X Form Form	·				
		Та	ble I - Noi	n-Deri	ivativ	ve S	ecur	ities Ac	quired	, Dis	posed of	f, or Be	neficia	ly Owned	l				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		ed (A) or str. 3, 4 and	Benefic Owned	es ially Following	Form (D) o		7. Nature of Indirect Beneficial Ownership			
										v	Amount (A) or (D) Pr		r Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common	Common Stock, \$0.0001 par value			10/2	25/200	/2007			М		1,456(1) A	\$25.	.07 22,172			D		
Common Stock, \$0.0001 par value				10/2	10/25/2007				M		960(1)	960 ⁽¹⁾ A		07 23	23,132		D		
Common Stock, \$0.0001 par value			10/2	25/200	5/2007			S		3,428(2) D	\$4	5 19	19,704		D			
			Table II -								osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Execution Date, if any (Month/Day/Year)		Date,	Code (Instr.		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		e	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivativ Securitie Beneficia Owned Followin Reported	e es ally g	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amour or Numbe of Shares	r	Transact (Instr. 4)	ion(s)			
Incentive Stock Option (right to buy)	\$25.07	10/25/2007			M			1,456 ⁽¹⁾	05/02/20	06 ⁽³⁾	05/02/2015	Commo Stock, \$0.0003 par valu	1,456	\$0 ⁽⁴⁾	4,56	9	D		
Non- Qualified Stock Option	\$25.07	10/25/2007			M			960 ⁽¹⁾	05/02/20	06 ⁽³⁾	05/02/2015	Commo Stock, \$0.0003	960	\$0 ⁽⁴⁾	3,01	.5	D		

Explanation of Responses:

(right to

buy)

- 1. Stock Option exercise pursuant to reporting person's 10(b)5-1 plan.
- 2. Shares sold pursuant to reporting person's 10(b)5-1 plan.
- 3. Option vests and becomes exercisable with respect to (i) twenty percent (20%) of the option shares upon the date exercisable and (ii) the 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).

Paul V Walsh Jr

par valu

10/29/2007

** 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.