FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-028*
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0.5

hours per response:

| 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 S | Section | 30(h) | of the I | nvestme | nt Coi | mpany Act o | of 1940 | | | | | | |
|--|---|--|---|----------|---|--|---|----------|---|--------|--|---|------|---------|--|-----------------------------------|---|--|
| 1. Name and Address of Reporting Person* SOOCH NAVDEEP S | | | | | | 2. Issuer Name and Ticker or Trading Symbol SILICON LABORATORIES INC [SLAB] | | | | | | | | | eck all app | olicable) | g Person(s) to Is | |
| | | | | | | Date of Earliest Transaction (Month/Day/Year) | | | | | | | | ┤ ๋ | | er (give title | | (specify |
| (Last) (First) (Middle) 400 W CESAR CHAVEZ | | | | | | 04/19/2012 | | | | | | | | | below) below) | | | 1 |
| (Street) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | |
| AUSTIN TX 78701 | | | | | | | | | | | | | | Forn | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | reis | OH | | |
| | | Tabl | e I - No | n-Deriva | ative | Sec | uritie | s Acc | quired, | Dis | posed o | f, or E | 3ene | ficial | ly Own | ed | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | y/Year) Exe | | A. Deemed Recution Date, any Ionth/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 | | | | 5) Secur Benef | ities icially d Following (| 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A) (D) | or | Price | Trans | action(s) 3 and 4) | | (11150.4) |
| Common Stock, \$0.0001 par value 04/19/2 | | | | | | 1012 | | | A | | 5,396(1) | | 1 | \$0.000 | 01 8 | 45,521 | D | |
| | | Та | | | | | | | | | sed 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 Date, if any (Month/Day/Year) | | I. Fransaction Code (Instr. 3) | | of | | 6. Date E Expiratio (Month/E | on Dat | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | b. Price of Derivative Security Instr. 5) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | - 1 | | | ıl | | | | | l | Amo | ount | | | | |

Explanation of Responses:

1. Reflects the grant of restricted stock units (RSUs) that will entitle Reporting Person to receive one share of common stock per RSU. The RSUs will vest completely on the earlier of (i) the first (1st) anniversary of the date of grant, and (ii) the date one day prior to the Annual Shareholders' Meeting in the year following the grant date. The grant will be settled pursuant to the terms of the Issuer's 2009 Stock Incentive Plan.

Date

Exercisable

(D)

Expiration

Saie-Yau Hui for Navdeep S. Sooch

Number

of Shares

Title

** 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).

Code

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.