Instruction 1(b).

## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT O	F CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person* <u>BRESEMANN DAVID P</u>					2. Issuer Name and Ticker or Trading Symbol SILICON LABORATORIES INC [ SLAB ]								eck all applic Directo	cable) or	g Person(s) to Issuer  10% Owner		vner		
(Last) 4635 BC	st) (First) (Middle) 35 BOSTON LANE				3. Date of Earliest Transaction (Month/Day/Year) 12/13/2005								X Officer below)	specify					
(Street) AUSTIN	I T	x	78735		4. If Amendment, Dat				of Original Filed (Month/Day/Year)					S. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)											Person	1				
1. Title of Security (Instr. 3) 2. Tran			saction	active Securities Acquaction action Execution Date, if any (Month/Day/Year)		3. 4. Securiti Transaction Code (Instr.		of, or Beneficial ries Acquired (A) or Of (D) (Instr. 3, 4 and		5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
							Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3	ion(s)			(111511.4)			
Common Stock, \$0.0001 par value			12/1	3/200	3/2005					416 <sup>(1)</sup> A		\$15.3	16,162			D			
Common Stock, \$0.0001 par value			12/1	13/2005				М		184(1)	A	\$15.4	4 16,	,346	346 D				
Common Stock, \$0.0001 par value		12/1	3/200	3/2005					960(2)	D	\$39.2	8 15,	15,386		D				
			Table II -									or Bene ble secu		Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion Date (Month/Day/Year) Execution Exercise (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)			4. Transa	ransaction ode (Instr.		5. Number 6. of Ex		6. Date Exercisable a Expiration Date (Month/Day/Year)				8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Ownership	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Non- Qualified Stock Option (right to buy)	\$15.1	12/13/2005			М			416 <sup>(1)</sup>	07/16/2000	3 <sup>(3)</sup>	09/21/2011	Common Stock, \$0.0001 par value	416	\$0 <sup>(4)</sup>	3,334	4	D		
Non- Qualified Stock Option (right to	\$15.44	12/13/2005			M			184 <sup>(1)</sup>	03/16/200	1 <sup>(5)</sup>	03/16/2011	Common Stock, \$0.0001	184	\$0 <sup>(4)</sup>	3,866	5	D		

## **Explanation of Responses:**

buy)

- 1. Stock option excercise pursuant to reporting person's 10(b)5-1 plan.
- 2. Shares sold pursuant to reporting person's 10(b)5-1 plan.
- 3. This option becomes exercisable as it vests in a series of thirty-six (36) successive equal monthly installments beginning July 16, 2003.
- 4. Not applicable per instruction 4(c)(iii).
- 5. This option becomes exercisable as it vests in a series of sixty (60) successive equal monthly installments beginning March 16, 2001.

Bruce A. Maurer, Power of Attorney for David P. Bresemann

12/15/2005

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.