FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|
| SIAILMLM | OF CHANGES | IN DENEFICIAL | OWNERSHIP |

OMB APPROVAL OMB Number: 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* FLUKE BRADLEY J | | | | | 2. Issuer Name and Ticker or Trading Symbol SILICON LABORATORIES INC [SLAB] | | | | | | | | | 5. Relationship of Repo (Check all applicable) Director | | | 10% (| Owner | |
|--|-----|--|---|---|---|--|---|---------------|--|---|---------------------|---|---------------------------|---|--|---|---|---|--|
| (Last) (First) (Middle) 4635 BOSTON LANE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/15/2004 | | | | | | | | | | X | Officer (give title below) Vice President | | | | |
| (Street) AUSTIN | · | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | Person | | | |
| | | Tabl | e I - No | | | _ | | | 1 | Dis | posed o | | | | | | | | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | | ır) i | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | 4 and Secu Bene Own | | nount of rities ficially ed Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | v | Amount | | (A) or (D) | Pric | e | | action(s) 3 and 4) | | (Instr. 4) | | |
| Common Stock, \$0.0001 par value | | | 09/15/2004 | | | | | S | | 3,500(1) | | D | \$3 | 4.37 | 152,066 | | D | | |
| Common Stock, \$0.0001 par value | | 09/15/2004 | | | | | S | | 500(1) | | D | \$3 | 4.39 | 151,566 | | D | | | |
| Common Stock, \$0.0001 par value | | | | | | | | | | | | | | 730 | | I | Bradley J. Fluke GRAT | | |
| Common Stock, \$0.0001 par value | | | | | | | | | | | | | | 340 | | I | Linda A. Fluke GRAT | | |
| Common Stock, \$0.0001 par value | | | | | | | | | | | | | | 4,750 | | I | by B. Fluke Trust ⁽²⁾ | | |
| | | Та | ıble II - I | Derivat (e.g., pı | ive S uts, c | ecu alls | urities s, warr | Acqu ants, | ired, D option | ispo s, co | sed of, onvertib | or E | Benef secur | icial ities | ly Ov) | vned | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversio or Exercis Price of Derivative Security | | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any | | | 4. Transaction Code (Instr. | | 5. Number of | | 6. Date Exercis Expiration Date (Month/Day/Ye | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | J | Deriv Secu (Inst | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nu of | ımber | | | | | |

Explanation of Responses:

- 1. Shares sold pursuant to reporting person's 10(b)5-1 plan.
- 2. Shares are held in family trust over which reporting person exercises voting and dispositive control over securities of issuer held in such trust.

Bradley J. Fluke 09/16/2004

** 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.