## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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 Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person*				2. Issuer Name <b>and</b> Ticker or Trading Symbol SILICON LABORATORIES INC [ SLAB ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
SOOCH NAVDEEP S					1	SILICOTT ENDORUTIONILIS ITTO [ SEAD ]								X	Dire	ctor	10% C	wner
(Last)	(Fi	rst) (	Middle)			ate of 19/20		t Trans	saction	(Mont	h/Day/Year)				Offic belo	er (give title w)	Other below)	(specify
4635 BO	STON LAN	NE .																
,					4. 11	Amen	dment,	Date	of Origir	nal File	ed (Month/Da	y/Year)			vidual c	or Joint/Group	Filing (Check A	pplicable
(Street)														Line)	Form	n filad by One	Reporting Pers	on
AUSTIN	ΤΣ	ζ	78735											X		,	e than One Rep	
-															Pers		e man one rep	orang
(City)	(St	ate) (	Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a					rities ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
							Code V		Amount	(A) or (D)		e	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock, \$0.0001 par value			03/19/2	2004				S		86,208(1)	D	\$52	2.2365	3,	718,121	D		
Common	Stock, \$0.0	001 par value		03/19/2	.004				S		5,172(1)	D	\$52	2.2365	1	35,602	I	Libra II, LP <sup>(2)</sup>
Common	Stock, \$0.0	001 par value		03/19/2	004				S		1,724(1)	D	\$52	2.2365	2	28,367	I	David T. Sooch Trust <sup>(3)</sup>
Common Stock, \$0.0001 par value 0		03/19/2	19/2004				S		1,724 <sup>(1)</sup>	D	\$52	\$52.2365		28,367	I	Kelly A. Sooch Trust <sup>(3)</sup>		
Common Stock, \$0.0001 par value		03/19/2	03/19/2004				S		1,724 <sup>(1)</sup> D \$52		2.2365	28,367		I	Kevin S. Sooch Trust <sup>(3)</sup>			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Security or Exercise (Month/Day/Year) if any			<del></del>		5. Number ction of		6. Date Exer Expiration D (Month/Day/		cisable and	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		Deriv Secu (Insti	vative deriv urity Secu tr. 5) Bene Owne Follo Repo	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amour or Number of Shares	er						

## **Explanation of Responses:**

- 1. Shares sold pursuant to reporting person's 10(b)5-1 plan.
- 2. These shares are held in a family limited partnership.
- 3. These shares are held in a trust for the benefit of the reporting person's children. The reporting person is co-trustee of the trust.

03/22/2004 Navdeep S. Sooch

\*\* 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.