FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-028							

OMB Number: 3235-0287 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

1. Name and Address of Reporting Person* IVESTER JONATHAN D (Last) (First) (Middle) 4635 BOSTON LANE				SILICON LABORATORIES INC [SLAB] 3. Date of Earliest Transaction (Month/Day/Year) 11/04/2003											all app	er (give title v)	10 Oi	% O	suer wner specify	
(Street) AUSTIN (City)	TX	K 7	78735 Zip)		4. If <i>F</i>	Line) X Form									r Joint/Group Filing (Check Applicable n filed by One Reporting Person n filed by More than One Reporting on					
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				ction	2A. Deemed Execution Date,		3. Tran Code	saction	4. Securities Acquired (A Disposed Of (D) (Instr. 3,				r	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
Common Stock, \$0.0001 par value					/2003			Code	v	Amount)	(A) or (D) Pr		e 4.94	Reported Transaction(s) (Instr. 3 and 4) 198,947 ⁽¹⁾		D	\dashv	(Instr. 4)	
Common Stock, \$0.0001 par value																118,000		I		Ivester Family Trust
		Та									osed of, onvertib					vned				
1. Title of Derivative Security (Instr. 3)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)		of		6. Date Expirat (Month	ion Da		Amo Ar) Seci Und Deri		str. 3	Deri Seci	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	,	(A)	(D)	Date Exercis	able	Expiration Date	Titl	or Nui of	ount nber ares						

Explanation of Responses:

 $1.\ Includes\ 151\ shares\ purchased\ through\ the\ Silicon\ Laboratories\ Inc.\ employee\ stock\ purchase\ plan\ on\ October\ 31,\ 2003.$

Jonathan D. Ivester 11/05/2003

** 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.