FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washin

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

gton, D.C. 20549	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

1. Name and Address of Reporting Person* <u>IVESTER JONATHAN D</u>						2. Issuer Name and Ticker or Trading Symbol SILICON LABORATORIES INC [ SLAB ]										all app	olicable) ctor	10	Person(s) to Issuer  10% Owner	
(Last) 4635 BO	(Fir	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/03/2003  Vice Pre									be	Other (specify below)				
(Street) AUSTIN (City)			78735 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual Line)  X								Forn Forn	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date,		Execution Date, f any		3. 4. Securitie Disposed C C 5)			quired ) (Instr.	(A) or 3, 4 a	nd	Securi Benefi Owner	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	ount (A) or (D)		Price	•	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)			
Common Stock, \$0.0001 par value 09/03/					3/2003	2003			S		900	00 D \$		\$45	.13	207,296		D		
Common Stock, \$0.0001 par value																1:	18,000	I		Ivester Family Trust
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year) if any (Month/Day/Year)		Date,		snaction de (Instr. Derivativ Securitie Acquired (A) or Disposec of (D) (Instr. 3, 4 and 5)		rative rities ired r osed )	6. Date Expiration (Month/D	on Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares		ount nber	nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersi Form: Direct (E or Indire (I) (Instr.	iip ) ct	11. Nature of Indirect Beneficial Ownership (Instr. 4)

**Explanation of Responses:** 

Jonathan D. Ivester

09/04/2003

\*\* 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.