FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

•

ONID APPROVAL											
OMB Number:	3235-028										
Estimated average burden											

0.5

hours per response:

## Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 BRESEMANN DAVID P							SILICON LABORATORIES INC [ SLAB ]									able)	10% (		owner	
(Last) 4635 BO		3. Date of Earliest Transaction (Month/Day/Year) 05/11/2004									Officer (give title below)  Vice Pres		reside	Other (s below) ent	респу					
(Street) AUSTIN TX 78735 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Ta	ble I - N	Non-Der	ivativ	/e Se	curi	ities A	cquire	ed, Di	sposed o	f, or B	enef	icially	Owned					
				2. Transaction Date (Month/Day/Year)		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			nd 5)	Beneficial Owned Fo		Form (D) o	: Direct   I r Indirect   I str. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)		
Common Stock, \$0.0001 par value				05/11/	11/2004				M		1,500(1)	A	\$	15.1	14,2	14,290(2)		D		
Common Stock, \$0.0001 par value					2004	2004					1,500 <sup>(3)</sup>	D	\$48	.7373(4)	12,	12,790		D		
Common	Stock, \$0.0	0001 par value		05/11/	2004				S		400(3)	D	\$48	.8233(5)	12,	390	390 D			
			Table I								posed of, convertib				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I		4. Transa Code ( 8)		Deri Seci Acq or D of (E	umber of vative urities uired (A) isposed D) (Instr. and 5)	6. Date Exer Expiration D (Month/Day/		ate	Amour Securi Underl Deriva	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		3. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	or No of	umber		(Instr. 4)	ion(s)			
Non- Qualified Stock Option (right to	\$15.1	05/11/2004			M			1,500 <sup>(1)</sup>	07/16	5/2003 <sup>(6)</sup>	09/21/2011	Common Stock	$\begin{bmatrix} \\ \\ \\ \end{bmatrix}$	,500	\$0 <sup>(7)</sup>	13,50	0	D		

## **Explanation of Responses:**

- 1. Stock option exercise pursuant to reporting person's 10(b)5-1 plan.
- 2. Includes 198 shares acquired under the Silicon Laboratories Inc. employee stock purchase plan on April 30, 2004.
- 3. Shares sold pursuant to reporting person's 10(b)5-1 plan.
- 4. Price represents the weighted average selling price. Prices range between \$48.60 and \$48.99.
- $5.\ Price\ represents\ the\ weighted\ average\ selling\ price.\ Prices\ range\ between\ \$48.82\ and\ \$48.91.$
- 6. The Option becomes exercisable as it vests in a series of thirty-six (36) successive equal monthly installments beginning July 16, 2003.
- 7. Not applicable per instruction 4(c)(iii).

David P. Bresemann 05/12/2004

\*\* 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.