## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
	Estimated average burde	en
	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*  SOOCH NAVDEEP S				2. Issuer Name <b>and</b> Ticker or Trading Symbol SILICON LABORATORIES INC [ SLAB ]						в]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
SOUCH NAVDEEP 5												X Dire		ctor	10% C	Owner		
(Last) 4635 BO	(Fi	,	(Middle	?)		3. Date of Earliest Transaction (Month/Day/Year) 07/09/2004								Offic belov	er (give title w)	Other below)	(specify	
1000 DO	OTOIV EITI	12				f Amon	dmont	Dot	of Ori	winal F	ilad (Manth/D	a. (\/a a.r)		C India	ماميام	r laint/Craus	Filing (Charle A	nalicable
(Ctt)					_   4. 11	Ameni	ument,	Dale	ol Oni	jiriai F	iled (Month/Da	ay/ Year)		6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) AUSTIN	ТХ	7	78735											X	Forn	n filed by One	Reporting Pers	son
														Form filed by More than One Reporting Person				
(City)	(St	ate)	(Zip)															
		Tab	le I -	Non-Deriv	/ative	Sec	uritie	s A	cquir	ed, D	isposed o	f, or E	Benefic	ially	Owne	ed		
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)					d 5) Sec Ben Owi		mount of urities leficially ned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code V		Amount	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)		action(s)		(Instr. 4)	
Common Stock, \$0.0001 par value				07/09/20	07/09/2004				S		33,160(1)	D	\$42.1	022(2)	3,274,713		D	
Common Stock, \$0.0001 par value		07/09/20	004				S		1,990(1)	D	\$42.1	022(2)	108,999		I	Libra II, LP <sup>(4)</sup>		
Common Stock, \$0.0001 par value		07/09/2004					S		663(1)	D	\$42.1	\$42.1022 <sup>(2)</sup>		19,499	I	David T. Sooch Trust <sup>(3)</sup>		
Common Stock, \$0.0001 par value		07/09/2004				S		663(1)	D	\$42.1	\$42.1022 <sup>(2)</sup>		19,499	I	Kelly A. Sooch Trust <sup>(3)</sup>			
Common Stock, \$0.0001 par value			07/09/20	004				S		663(1)	D	\$42.1	\$42.1022 <sup>(2)</sup>		19,499	I	Kevin S. Sooch Trust <sup>(3)</sup>	
		Ta	able I								posed of, , convertib				vned			
Security or Exercise (Month/Day/Year) if any			ansaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Day (Month/Day/Y		Date	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deriv Secu (Inst	rivative curity str. 5)	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 Exer	cisable	Expiration Date	Title	or Number of Shares					

## **Explanation of Responses:**

- 1. Shares sold pursuant to reporting person's 10(b)5-1 plan.
- $2.\ Price\ represents\ the\ weighted\ average\ selling\ price.\ Prices\ range\ between\ \$41.95\ and\ \$42.35.$
- 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.
- 4. These shares are held in a family limited partnership.

Bruce A. Maurer, Power of Attorney for Navdeep S. Sooch

07/12/2004

\*\* 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.