FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C 205/0	
vvasnington,	D.C. 20549	

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL
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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						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)  Director 10% Owner					
(Last)		rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/05/2011									X	X Office (give title below) Other (specify below)  Sr VP of Worldwide Operations				
(Street) AUSTIN	T	K	78701		4. 1	4. If Amendment, Date of Original Filed (Mo							y/Year)		6. Ind Line)	Form fi	oint/Group Filing (Check Appl ed by One Reporting Person ed by More than One Reporti			1
(City)	(St	ate)	(Zip)												Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/		ar)	if any	emed ion Date, /Day/Year)	9,  ⊺	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									-	Code V		Amount	(A) or (D)		rice	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)
Common	Stock, \$0.0	0001 par value		01/05	5/201	2011				M		6,000	) A \$		31.96	116,577		D		
Common	Stock, \$0.0	0001 par value		01/05	5/201	1				S		6,000(1	D \$46		\$46.9	110	110,577		D	
Common	Stock, \$0.0	k, \$0.0001 par value														7,050			I	S. Ivester Heritage Trust <sup>(2)</sup>
Common Stock, \$0.0001 par value															7,0	,050		I	E. Ivester Heritage Trust <sup>(2)</sup>	
Common Stock, \$0.0001 par value															7,0	050		I	B. Ivester Heritage Trust <sup>(2)</sup>	
		٦	Гable II -													Owned				•
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	4. Fransa Code (	ction	on of Exp		6. Da Expi	6. Date Exercisable and Expiration Date (Month/Day/Year)					urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I) Or Indirect (I) (Instr	Ownership	Beneficial Ownership (Instr. 4)
				(	Code	v	(A)	(D)	Date Exer	rcisable		xpiration ate	Title	or Nu of	mber ares					
Non- Qualified Stock Option (right to buy)	\$31.96	01/05/2011			M			6,000	02/1	5/2009 <sup>(:</sup>	3) 0	2/15/2018	Commo Stock, \$0.0001 par valu	6,	000	(4)	13,94	5	D	

## **Explanation of Responses:**

- ${\it 1. Shares sold pursuant to Reporting Person's 10b5-1 Trading Plan.}$
- 2. These shares are held in a trust for the benefit of Reporting Person's child. Reporting Person is co-trustee of the trust.
- 3. Option vests and becomes exercisable with respect to (i) twenty-five percent (25%) of the option shares upon the date exercisable and (ii) the balance of the option shares in a series of thirty-six (36) successive monthly installments over the thirty-six (36) month period measured from the date exercisable.
- 4. Not applicable per instruction 4(c)(iii).

Jonathan D. Ivester

01/07/2011

\*\* 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.