FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
| | | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | JVAL |
|------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burd | 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

| | | | | | _ | | | | | | | | | | | | | | | | |
|--|---|--|--|-------------------------------|--------|--|-------|--------|--------------------------------------|---|--|--|--|--|--|--|--------------------------------|--|--|--|--|
| Name and Address of Reporting Person* WOOD WILLIAM P | | | | | | 2. Issuer Name and Ticker or Trading Symbol SILICON LABORATORIES INC [SLAB] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
| (Last) | | irst) | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2017 | | | | | | | | | | or (give title | 10% Ow Other (s below) | | 1 | | |
| (Street) AUSTIN TX 78701 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | | | |
| | | Tab | le I - No | n-Deriv | ative/ | e Se | curit | ies Ac | quirec | , Dis | posed o | of, or Be | eneficia | lly O | wnec | l | | | | | |
| Date | | | | 2. Transa Date (Month/I | | Execution Date, | | Code | Transaction Disposed Code (Instr. 5) | | ities Acquired (A) or d Of (D) (Instr. 3, 4 and | | i S | Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | Code | v | Amount | ınt (A) or (D) | | Reported Transaction(s) (Instr. 3 and 4) | | tion(s) | | | (Instr. 4) | | |
| Common Stock, \$0.0001 par value | | | | 06/01 | 1/2017 | | | | M | | 5,000 | 5,000 A S | | 13 | 3 35,526 | | | D | | | |
| Common Stock, \$0.0001 par value 06/0 | | | | 06/01 | L/2017 | 2017 | | S | | 5,000 | (1) D | \$74.4 | 45 | 5 30,526 | | | D | | | | |
| Common Stock, \$0.0001 par value | | | | | | | | | | | | 40,442 | | ,442 | | | Umari II, LP ⁽²⁾ | | | | |
| | | Т | able II - | | | | | | | | osed of converti | | | y Ow | ned | , | | , | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, | | ansaction ode (Instr. | | n of E | | 6. Date Exercisa Expiration Date (Month/Day/Yea | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amount or Number of Shares | | | | | | | | |
| Non- Qualified Stock Option (right to | \$21.13 | 06/01/2017 | | | М | | | 5,000 | 12/12/20 | 008 | 12/12/2018 | Common Stock, \$0.0001 par value | 5,000 | | (3) | 0 | | D | | | |

Explanation of Responses:

- 1. Shares sold pursuant to Reporting Person's 10b5-1 Trading Plan.
- 2. Reporting Person is the sole general partner of Umari II, LP. Reporting Person may be deemed a beneficial owner of the shares held by Umari II, LP, but disclaims beneficial ownership in the shares held by Umari II, LP, except to the extent of any pecuniary interest therein.
- 3. Not applicable per instruction 4(c)(iii).

Saie-Yau Hui for William P. Wood

06/02/2017

** 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.