FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHAN | GES IN BEN | IEFICIAL O | WNERSHIP |
|-----------|---------|------------|-------------------|----------|

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| 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* ENLOE ROBERT TED III | | | | 2. Issuer Name and Ticker or Trading Symbol SILICON LABORATORIES INC [SLAB] | | | | | | | |] (Ch | elationship of eck all applic | able) r | g Persor | 10% Ow | ner | |
|--|--|----------------------------|---|---|---|---|--------|---------------------|---|---------------|--------------------------------------|--|--|---|---|---|---|---|
| | APLE AVE | • | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/24/2008 | | | | | | | Officer below) | (give title | | Other (s | pecify | |
| SUITE 200 (Street) DALLAS TX 75201 | | | 4. II | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Line | X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| (City) | (Si | ate) | (Zip) | , | | Person | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transar Date (Month/Date) | | | Execution Date, | | Code (Instr. 5) | | | Benefici Owned F | es ally Following | Form: [| m: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | | | |
| | | | | | | | Code V | , | Amount | (A) or (D) | Price | Reported Transact (Instr. 3 | ion(s) | | (| (Instr. 4) | | |
| | 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 | ise (Month/Day/Year) /e | 3A. Deemed Execution Date, if any (Month/Day/Year) | ate, T | 4. Transaction Code (Instr. 8) | | ı of | | 6. Date Exercisable an Expiration Date (Month/Day/Year) | | e and | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Ownershi Form: Direct (D) or Indirect (I) (Instr. 4 | Ownership Form: Direct (D) or Indirect | Beneficial Ownership t (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Exp Dat | piration te | Title | Amount or Number of Shares | | | | | |
| Non- Qualified Stock Option (right to buy) | \$33.85 | 04/24/2008 | | | A | | 5,000 | | 04/24/2008 ⁽¹⁾ | 04/2 | /24/2018 | Common Stock, \$0.0001 par value | 5,000 | (2) | 5,000 | | D | |

Explanation of Responses:

- 1. The Option is immediately exercisable but the shares vest upon the optionee's completion of one year of board service measured from the grant date.
- 2. Not applicable per instruction 4(c)(iii).

Bruce A. Maurer for Robert Ted Enloe III

04/28/2008

** 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.