FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL	

3235-0287 OMB Number: 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*  SOOCH NAVDEEP S						2. Issuer Name <b>and</b> Ticker or Trading Symbol SILICON LABORATORIES INC [ SLAB ]								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
<u>5000C1</u>	111111111	<u> </u>													X Dire	ctor	10% C	Owner	
(Last) (First) (Middle) 4635 BOSTON LANE						3. Date of Earliest Transaction (Month/Day/Year) 11/20/2003								<b>-</b>	X Office belo	•	Other below on & CEO	(specify )	
,					.									-					
(Street)						If Amendment, Date of Original Filed (Month/Day/Year)								6. Ir		or Joint/Group Filing (Check Applicable			
AUSTIN TX 78735															X Forr	n filed by One	Reporting Pers	son	
(City)	(St	ate)	(Zip)													Form filed by More than One Reporting Person			
		Tab	le I - N	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or	Bene	ficial	y Own	ed			
				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				Secui Bene Owne	cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or Pi	ice		rted action(s) . 3 and 4)		(Instr. 4)	
Common	Stock, \$0.0	001 par value		11/20/2003				G	V	200,000	I	)	<b>\$0</b> <sup>(1)</sup>		438,313	D			
Common Stock, \$0.0001 par value				11/28/2003				S		78,880 <sup>(2)</sup>	I	\$	\$49.0769		359,433	D			
Common Stock, \$0.0001 par value 11/					2003			S		4,733(2)	I	\$	\$49.0769		73,480	I	By Libra II, L.P. <sup>(3)</sup>		
Common Stock, \$0.0001 par value 11/28/2					2003				S		1,578 <sup>(2)</sup>	I	\$	49.076	9 4	10,994	I	David T. Sooch Trust <sup>(4)</sup>	
Common Stock, \$0.0001 par value 11/28/2					2003	003			S		1,578(2)	I	\$	\$49.0769		40,994	I	Kelly A. Sooch Trust <sup>(4)</sup>	
Common Stock, \$0.0001 par value 11/28/200					2003	03			S		1,578(2)	I	\$	\$49.0769		40,994	I	Kevin S. Sooch Trust <sup>(4)</sup>	
		Т	able II								osed of, convertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year	if any	emed ion Date,	4. Transa Code ( 8)	ction	5. Number of		6. Date Exer Expiration D (Month/Day/		cisable and	7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		8 D S (I	Price of erivative ecurity nstr. 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 Exerci	sable	Expiration Date	Title	Amo or Num of Shai	ber					

## **Explanation of Responses:**

- 1. Gratuitous transfer for which no consideration was received.
- 2. Shares sold pursuant to reporting person's 10(b)5-1 plan.
- 3. These shares are held in a family limited partnership.
- 4. 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.

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

12/01/2003

\*\* 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.