FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnington,	D.C.	20549	

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours ner resnonse:	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* <u>BRENNAN RUSSELL J</u>			2. Issuer Name and Ticker or Trading Symbol SILICON LABORATORIES INC [SLAB]								eck all applic Directo	able)	g Person(s) to Issuer 10% Owne Other (spe		vner			
(Last) 4635 BC	(F OSTON LAI	rirst) NE	(Middle)	3. Date of E 04/12/200				ate of Earliest Transaction (Month/Day/Year) .2/2006						below)	Officer (give title below) Chief Finan		below)	респу
(Street) AUSTIN (City)		X state)	78735 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
			ble I - No						<u> </u>	, Dis	1							
Da		Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.) 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		(A) or . 3, 4 and 5	Beneficia Owned F	s Illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	action(s)			(Instr. 4)	
Common Stock, \$0.0001 par value			04/1	2/200	2/2006					308(1)	A	\$21.65	5 9,2	9,226		D		
Common Stock, \$0.0001 par value		04/1	2/200	/2006			М		3,859(1)) A	\$21.65	5 13,	13,085		D			
Common Stock, \$0.0001 par value 04/		04/1	2/200	/2006		S		4,167 ⁽²⁾ D \$5		\$54.02	8,918			D				
			Table II -								osed of, convertib			Owned				1
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date Security or Exercise (Month/Day/Year) if any		Date,	Code (Instr.		Derivative I		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title an Amount o Securities Underlyin Derivative (Instr. 3 ar	f g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported	Owners Form: Direct (or Indii (I) (Inst	Ownership	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares		Transaction (Instr. 4)	on(s)		
Incentive Stock Option (right to buy)	\$21.65	04/12/2006			М			308 ⁽¹⁾	09/12/200	03 ⁽³⁾	09/12/2012	Common Stock, \$0.0001 par value	308	\$0 ⁽⁴⁾	5,235	5	D	
Non- Qualified Stock Option (right to	\$21.65	04/12/2006			M			3,859 ⁽¹⁾	09/12/200	03 ⁽³⁾	09/12/2012	Common Stock, \$0.0001 par value	3,859	\$0 ⁽⁴⁾	65,59	9	D	

Explanation of Responses:

- 1. Stock option exercise pursuant to reporting person's 10(b)5-1 plan.
- 2. Shares sold pursuant to reporting person's 10(b)5-1 plan.
- 3. Option vests and becomes exercisable with respect to (i) twenty percent (20%) of the option shares upon optionee's completion of one year of service measured from the grant date and (ii) the balance of the option shares in a series of forty-eight (48) successive monthly installments over the forty-eight (48) month period measured from the first year anniversary of the grant date.
- 4. Not applicable per instruction 4(c)(iii).

Russell J. Brennan

04/17/2006

** 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.