

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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* <u>GAY GARY R</u>  (Last) (First) (Middle) 4635 BOSTON LANE  (Street) AUSTIN TX 78735  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>SILICON LABORATORIES INC [ SLAB ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) Other (specify below) <u>VP of Worldwide Sales</u>
	3. Date of Earliest Transaction (Month/Day/Year) 04/03/2006	
		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	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 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock, \$0.0001 par value	04/03/2006		M		4,667 <sup>(1)</sup>	A	\$15.44	17,453	D	
Common Stock, \$0.0001 par value	04/03/2006		M		333 <sup>(1)</sup>	A	\$20.19	17,786	D	
Common Stock, \$0.0001 par value	04/03/2006		s		5,000 <sup>(2)</sup>	D	\$55.03	12,786	D	

**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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Non-Qualified Stock Option (right to buy)	\$15.44	04/03/2006		M		4,667 <sup>(1)</sup>		03/16/2001 <sup>(3)</sup>	03/16/2011	Common Stock, \$0.0001 par value	4,667	\$0 <sup>(4)</sup>	0	D	
Non-Qualified Stock Option (right to buy)	\$20.19	04/03/2006		M		333 <sup>(1)</sup>		10/24/2005 <sup>(5)</sup>	10/24/2012	Common Stock, \$0.0001 par value	333	\$0 <sup>(4)</sup>	18,834	D	

**Explanation of Responses:**

- Stock option exercise pursuant to reporting person's 10(b)5-1 plan.
- Shares sold pursuant to reporting person's 10(b)5-1 plan.
- This option becomes exercisable as it vests in a series of sixty (60) successive equal monthly installments beginning March 16, 2001.
- Not applicable per instruction 4(c)(iii).
- This option becomes exercisable as it vests in a series of twelve (12) successive equal monthly installments beginning October 24, 2005.

Gary R. Gay

04/04/2006

\*\* 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.