### Edgar Filing: IVESTER JONATHAN D - Form 4

Form 4	ONATHAN D										
May 13, 201	ЛЛ								OMB A	PPROVAL	
	UNITEDS	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no lon subject to Section	F CHAN	GES IN SECUR		ICIA	LOW	NERSHIP OF	Expires: Estimated a burden hou				
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b).											
(Print or Type	Responses)										
	Address of Reporting F IONATHAN D	Person <u>*</u>	Symbol	Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
				SILICON LABORATORIES INC SLAB]				(Check all applicable)			
(Last) (First) (Middle) 3. Date of (Month/D 400 W CESAR CHAVEZ 05/11/20				-				Director 10% Owner X_ Officer (give title Other (specify below) below) VP of Worldwide Operations			
				ndment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
AUSTIN, T	TX 78701		Thed(Mo	_X_ Form filed by					One Reporting Person More than One Reporting		
(City)	(State) (	Zip)	Tabl	e I - Non-D	<b>Derivative</b>	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	n Date, if	3. Transactio Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	ispose 4 and (A)	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
C				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock, \$0.0001 par value	05/11/2010			S	6,000 (1)	D	\$ 47.31	130,272 <u>(2)</u>	D		
Common Stock, \$0.0001 par value	05/11/2010			S	900 <u>(1)</u>	D	\$ 47.31	8,850	I	E Ivester Heritage Trust $(3)$	
Common Stock, \$0.0001 par value	05/11/2010			S	900 <u>(1)</u>	D	\$ 47.31	8,850	Ι	S Ivester Heritage Trust (4)	

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Common Stock, \$0.0001 par value	05/11/2010	S	900 <u>(1)</u> D	\$ 47.31	8,850	Ι	E Ivester Heritage Trust (4)
Common Stock, \$0.0001 par value	05/11/2010	S	900 <u>(1)</u> D	\$ 47.31	8,850	I	B Ivester Heritage Trust (4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transactio	5. orNumber	6. Date Exerc Expiration Da		7. Title and Amount of	8. Price of Derivative	9. Nu Deriv
Security	or Exercise	(	any	Code	of	(Month/Day/		Underlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	· ·	,	Securities	(Instr. 5)	Bene
	Derivative				Securities	s		(Instr. 3 and 4)		Owne
	Security				Acquired					Follo
					(A) or					Repo
					Disposed					Trans
					of (D)					(Instr
					(Instr. 3,					
					4, and 5)					
								Amount		
						Dete	Environtion	or		

		Date Exercisable	Expiration Date	Title	or Number of
Code V (A)	(D)				Shares

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
IVESTER JONATHAN D 400 W CESAR CHAVEZ AUSTIN, TX 78701			VP of Worldwide Operations			
Signatures						

#### Jonathan D. Ivester 05/13/2010

<u>\*\*</u>Signature of Reporting Person

Date

**Reporting Owners** 

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## **Explanation of Responses:**

- \* 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).
- (1) Shares sold pursuant to Reporting Person's 10b5-1 Trading Plan.
- (2) Includes shares purchased by Reporting Person on April 30, 2010 through the Issuer's Employee Stock Purchase Plan.
- (3) These shares are held in a trust for the benefit of Reporting Person's child.
- (4) These shares are held in a trust for the benefit of Reporting Person's child. Reporting Person is co-trustee of the trust.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.