

SILICON LABORATORIES INC
 Form 4
 March 07, 2014

FORM 4

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549**

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 Hoff Kurt W

2. Issuer Name and Ticker or Trading Symbol
 SILICON LABORATORIES INC
 [SLAB]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

(Last) (First) (Middle)
 400 W CESAR CHAVEZ
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)
 03/05/2014

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
 Sr VP of Worldwide Sales

AUSTIN, TX 78701

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 ___ Form filed by More than One Reporting Person

(City) (State) (Zip)

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 Ownership (Instr. 4) |
|----------------------------------|--------------------------------------|----------------------------------------------------|--------------------------------|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------------------------|-----------------------------------|
| | | | Code | V | Amount (A) or (D) Price | | |
| Common Stock, \$0.0001 par value | 03/05/2014 | | M | | 2,200 A \$ 34.29 | 42,813 | D |
| Common Stock, \$0.0001 par value | 03/05/2014 | | S | | 2,200 (1) D \$ 52.9611 (2) | 40,613 | D |
| Common Stock, \$0.0001 par value | 03/06/2014 | | M | | 5,407 A \$ 34.29 | 46,020 | D |

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| | | | | | | | |
|----------------------------------|------------|---|---------------------|---|-----------------------------|--------|---|
| Common Stock, \$0.0001 par value | 03/06/2014 | S | <u>5,407</u> (1) | D | \$ <u>52.9621</u> (2) | 40,613 | D |
| Common Stock, \$0.0001 par value | 03/06/2014 | M | 1,900 | A | \$ 34.29 | 42,513 | D |
| Common Stock, \$0.0001 par value | 03/06/2014 | S | <u>1,900</u> (1) | D | \$ <u>52.9584</u> (2) | 40,613 | D |

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.

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(9-02)

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 Underlying Security (Instr. 3 and 4) |
|--------------------------------------------|--------------------------------------------------------|--------------------------------------|----------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------------|
| | | | | Code | V (A) (D) | Date Exercisable Expiration Date | Title |
| Incentive Stock Option (right to buy) | \$ 34.29 | 03/05/2014 | | M | 2,200 | 01/03/2006 ⁽³⁾ 01/03/2015 | Common Stock, \$0.0001 par value |
| Incentive Stock Option (right to buy) | \$ 34.29 | 03/06/2014 | | M | 5,407 | 01/03/2006 ⁽³⁾ 01/03/2015 | Common Stock, \$0.0001 par value |
| Non-Qualified Stock Option (right to buy) | \$ 34.29 | 03/06/2014 | | M | 1,900 | 01/03/2006 ⁽³⁾ 01/03/2015 | Common Stock, \$0.0001 par value |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|-------------------------------------------------------|---------------|-----------|--------------------------|-------|
| | Director | 10% Owner | Officer | Other |
| Hoff Kurt W 400 W CESAR CHAVEZ AUSTIN, TX 78701 | | | Sr VP of Worldwide Sales | |

Signatures

Kurt W. Hoff 03/07/2014

__Signature of
Reporting Person

Date

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) Price represents the weighted average selling price. Prices range between \$52.94 and \$53.00.
- (3) Option vests and becomes exercisable with respect to (i) twenty percent (20%) of the option shares upon the date exercisable 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 date exercisable.
- (4) Not applicable per instruction 4(c)(iii).

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.