Edgar Filing: SILICON LABORATORIES INC - Form 4

		ugai i i	ing. OIL			Or in	_0 // 1	0 101114				
Form 4 January 30, 2		NC										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										OMB APPROVAL		
	UNITED S	TATES		shington,			NGE (COMMISSION	OMB Number:	3235-0287		
Check this box				anngton,	D.C. 205	47				January 31,		
if no long	F CHAN	GES IN I	BENEFI	CIAI	OW	NERSHIP OF	Expires:	2005				
subject to STATEMENT OF CHAR				SECURITIES					average			
Form 4 or				Secontines					burden hou response	•		
Form 5	They pursually to Section 10(a) of the Securities Exchange Act of 1734,							·				
obligatior may conti				•	.			f 1935 or Sectio	n			
See Instru		30(h)	of the In	vestment	Company	/ Act	of 194	40				
1(b).												
(Print or Type R	Responses)											
1 Nama and A	ddrass of Paparting I	larson *	0 T		m: 1 m			5 Deletionship of	f Doporting Dor	son(s) to		
			2. Issuer Symbol	Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
c	, ,		•	CON LABORATORIES INC								
	[SLAB]					(Check all applicable)						
(Last) (First) (Middle) 3. Date of			of Earliest Transaction				Director 10% Owner X Officer (give title Other (specify					
			lonth/Day/Year)				XOfficer (give below)	e title Oth below)	er (specify			
400 WEST CESAR CHAVEZ01/26/20				2017					CEO			
(Street) 4. If Ame				Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mon				/Ionth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
AUSTIN, TX 78701			Form f				Form filed by M	iled by More than One Reporting				
								Person				
(City)	(State) (Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acc	uired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction Date								7. Nature of			
Security (Instr. 3)	(Month/Day/Year)	any	on Date, 11	e, if Transaction(A) or Disposed of Code (D)				Securities Beneficially	Form: Direct (D) or	Beneficial		
(Month/Day/							5)	Owned	Indirect (I)	ect (I) Ownership		
								Following Reported	(Instr. 4)	(Instr. 4)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common						, í						
Stock,	01/26/2017			А	7,021	А	\$0	254,746	D			
\$0.0001 par	01/20/2017			11	7,021	11	ψυ	231,710	D			
value												
Common												
Stock,	01/26/2017			А	11,405	А	\$0	266,151	D			
\$0.0001 par												
value												

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 (9-02)

Edgar Filing: SILICON LABORATORIES INC - Form 4

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 Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D)		ate	Under Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Tuttle George Tyson 400 WEST CESAR CHAVEZ AUSTIN, TX 78701			CEO				
Signatures							
Saie-Yau Hui for George T. Tuttle	()1/30/2017					
**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).

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.