Edgar Filing: Hollister John C - Form 4

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| Form 4 | | | | | | | | | | | |
|---|--|--|---|--|--------------|------------------------|---|--|--|----------|--|
| October 19, 2017 FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | OMB APPROVAL | | | |
| | LOUIVE 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | |
| Check this box if no longer subject to Section 16. Form 4 or | | | | NGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | Expires:January 3 200Estimated averageburden hours per response0 | | |
| Form 5 obligatic may con <i>See</i> Instr 1(b). | tinue. Section 17(a | a) of the l | Public Ut | | ling Cor | npan | y Act of | e Act of 1934, E 1935 or Section 0 | 1 | | |
| (Print or Type | Responses) | | | | | | | | | | |
| Hollister John C Symbol | | | Symbol | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | SILICON LABORATORIES INC [SLAB] | | | | | (Check all applicable) | | | | | |
| (Month. | | | | of Earliest Transaction /Day/Year) 2017 | | | | Director 10% Owner X Officer (give title Other (specify below) below) Sr VP and CFO | | | |
| | | | endment, Date Original nth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| AUSTIN, T | TX 78701 | | | | | | | Form filed by M Person | ore than One Re | porting | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Transaction Date 2A. Deemed Ionth/Day/Year) Execution D any (Month/Day/ | | Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) | | | d of (D) | Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common | | | | Code V | Amount | or | Price | Transaction(s) (Instr. 3 and 4) | | | |
| Stock, \$0.0001 par value | 10/18/2017 | | | S | 2,000 (1) | D | \$ 88.45 | 64,767 | 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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 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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|---|---------------------|--------------------|-------|--|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|------------|---------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| Hollister John C 400 W CESAR CHAVEZ AUSTIN, TX 78701 | | | Sr VP and CFO | | | | | |
| Signatures | | | | | | | | |
| Saie-Yau Hui for John C. Hollister | | 10/19/2017 | | | | | | |
| **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).

(1) Shares sold pursuant to Reporting Person's 10b5-1 Trading Plan.

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.