Piovaccari Alessandro Form 4 January 29, 2018

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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if no longer subject to Section 16. Form 4 or Form 5

Check this box

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

(Print or Type Responses)

1(b).

value

1. Name and Address of Reporting Person ** Piovaccari Alessandro			_	Symbol		Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer					
		(Last) (First) (Middle)		SILICOI [SLAB]	N LABO	RATORIES INC	(Check all applicable)					
(Last) (First) (Middle)			· ·	3. Date of (Month/Da		ransaction	Director 10% Owner X Officer (give title Other (specify below)					
	400 W CESA	AR CHAVEZ		01/25/20	18		SR VP and CTO					
(Street)				4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
(a.a.a.a.y				Filed(Month/Day/Year)			Applicable Line)					
							X Form filed by One Reporting Person Form filed by More than One Reporting					
	AUSTIN, TX	¥ 78701					Person	More than one it	oporting			
	(City)	(Street) USTIN, TX 78701 (City) (State) (Zip) Citle of 2. Transaction Date 2A curity (Month/Day/Year) Ex		Table I - Non-Derivative Securities Ac			equired, Disposed of, or Beneficially Owned					
	1.Title of	2. Transaction Date	e 2A. Deen	ned	3.	4. Securities	5. Amount of	6. Ownership	7. Nature of			
	Security	(Month/Day/Year)	Execution	n Date, if	Transacti	onAcquired (A) or	Securities	Form: Direct	Indirect			
	(Instr. 3)		any		Code	Disposed of (D)	Beneficially	(D) or	Beneficial			

(City)	(State) (2	Table	I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		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	(D)	Price	(Ilistr. 5 and 4)		
Common Stock, \$0.0001 par value	01/25/2018		A	5,048	A	\$ 0	25,558	D	
Common Stock, \$0.0001 par	01/25/2018		A	4,768	A	\$0	30,326	D	

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

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amaunt		
						Date	Expiration				
						Exercisable	Date				
				Code V	(A) (D)						
				Code V	4, and 5)		•	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Piovaccari Alessandro 400 W CESAR CHAVEZ AUSTIN, TX 78701

SR VP and CTO

Signatures

Saie-Yau Hui for Alessandro Piovaccari

01/29/2018

**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.

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