

DSP GROUP INC /DE/
Form 3
September 14, 2007

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF 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 *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
NXP B.V.		(Month/Day/Year)	DSP GROUP INC /DE/ [DSPG]	
(Last)	(First)	(Middle)	09/04/2007	
HIGH TECH CAMPUS 60, 5656 AG EINDHOVEN			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
THE NETHERLANDS			<input type="checkbox"/> Director	<input checked="" type="checkbox"/> 10% Owner
(City)	(State)	(Zip)	<input type="checkbox"/> Officer	<input type="checkbox"/> Other
			(give title below) (specify below)	
			6. Individual or Joint/Group Filing(Check Applicable Line)	
			<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common stock, par value \$0.001 per share	4,186,603	D ⁽¹⁾	

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) Title	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	---	--	---	--

Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
NXP B.V. HIGH TECH CAMPUS 60 5656 AG EINDHOVEN THE NETHERLANDS	Â	Â X	Â	Â

Signatures

/s/ Theodoor Antonius Carel Maria Claasen, Title: Executive Vice President NXP B.V.

09/14/2007

__Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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) This Form 3 is filed on behalf of NXP B.V., KASLION Acquisition B.V., KASLION Holding B.V. and KASLION S.a r.l. These shares are held directly by NXP B.V. KASLION Acquisition B.V. is the sole member of NXP B.V. and may be deemed to be the beneficial owner of shares owned by NXP B.V. KASLION Acquisition B.V. disclaims beneficial ownership of these shares, except to the extent of its pecuniary interest in such shares. KASLION Holding B.V. is the majority shareholder of KASLION Acquisition B.V. and may be deemed to be the beneficial owner of shares owned by NXP B.V. KASLION Holding B.V. disclaims beneficial ownership of these shares, except to the extent of its pecuniary interest in such shares. KASLION S.a r.l. is the sole shareholder of KASLION Holding B.V. and may be deemed to be the beneficial owner of shares owned by NXP B.V. KASLION S.a r.l. disclaims beneficial ownership of these shares, except to the extent of its pecuniary interest in such shares.

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.