FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
-	hours nor resnance.	0.5								

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* FISHMAN JERALD						2. Issuer Name and Ticker or Trading Symbol ANALOG DEVICES INC [ADI]									ionship of Reporting Pers all applicable) Director			10% Ow	ner
(Last) (First) (Middle) P.O. BOX 9106 THREE TECHNOLOGY WAY						3. Date of Earliest Transaction (Month/Day/Year) 05/31/2011									below)	icer (give title ow) PRESIDENT &		Other (s below)	pecify
(Street) NORWOOD MA 02062-9106 (City) (State) (Zip)				— [4. —	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(3		(Zip)	lon-De	rivati	ve S	-Cur	ities A	cauirea	1 D	isposed (of or Re	nefic	ially (Owned				
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/			action	on 2A. Deemed Execution Date,		med on Date,	3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amou Securitie Benefici Owned F		es ally Following	Form (D) o	: Direct I r Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3	tion(s)			(Instr. 4)		
Comm Stock-\$.16-2/3 value 05/31/20							11		М		15,000	A	\$19	9.89	436,348			D	
Comm Stock-\$.16-2/3 value 05/31/20)11		S		15,000	D	\$41.0)261 ⁽¹⁾	421,348			D		
			Table I								posed of converti				vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution Date, if any (Month/Day/Year) 8			Transaction Code (Instr.		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Am of Securities Underlying De Security (Instr. 4)		ative S	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	or	ount nber ires					
Non- Qualified Stock Option (right to buy)	\$19.89	05/31/2011			M			15,000	09/24/200)4 ⁽²⁾	09/24/2012	Comm Stock-\$.16 2/3 value		000	\$0.0000	205,00	00	D	

Explanation of Responses:

1. These shares were disposed of in multiple transactions on May 31, 2011 at an actual sales price ranging from \$41.000 to \$41.078 per share. The price reported reflects the weighted average sale price for the transactions. The reporting person undertakes to provide upon request by SEC staff, the issuer or a security holder of the issuer, full information regarding the number of shares sold at each separate price.

2. This option vested in equal installments on the second, third, fourth and fifth anniversaries of the original grant date. The option was fully vested as of September 24, 2007 in accordance with its terms.

<u>Kristin S. Caplice, Assistant</u>
<u>General Counsel, by Power of</u> 06/01/2011

<u>Attorney</u>

** Signature of Reporting Person

Date

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

- * 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.

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 Number.