FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden hours per response: 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*  CHAMPY JAMES						2. Issuer Name <b>and</b> Ticker or Trading Symbol ANALOG DEVICES INC [ ADI ]								(Che	5. Relationship of Repor (Check all applicable) X Director			ting Person(s) to Issuer 10% Owner	
	O. BOX 9106				3. Date of Earliest Transaction (Month/Day/Year) 11/23/2016								Officer (give title below)			e Other (below)		r (specify v)	
ONE TECHNOLOGY WAY  (Street)  NORWOOD MA 02062-91			106	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(SI	tate) (2	(Zip)												Pers	on			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				2. Transacti Date (Month/Day		Exec if an	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4, 5)			Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Owners (1)	
									Code	v	Amount	(A) o (D)	r Pric	е	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)
Comm Stock - \$.16-2/3 value 11/23/20					)16			G <sup>(1)</sup>	v	3,445	D	\$	0	17,900		] :	D		
Comm Stock - \$.16-2/3 value															69,	025		I	by James A. Champy 2012 Irrevocable Trust
	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)			ransaction Code (Instr.		of		6. Date Exerci Expiration Da (Month/Day/Y		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		D S (I	Price of erivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					`ada l	v	(0)	(D)	Date		Expiration	Titlo	Amoun or Numbe of						

## **Explanation of Responses:**

1. Consists of gifts to educational institutions

## Remarks:

/s/ Cynthia M. McMakin, Associate General Counsel, by 11/28/2016 Power of Attorney

\*\* 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.