## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

**OMB APPROVAL** 3235-0287 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* SEIF MARGARET K					2. Issuer Name and Ticker or Trading Symbol ANALOG DEVICES INC [ ADI ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director     10% Owner  Office of the title Check and Chec						
(Last) P.O. BOX ONE TE	•	irst) GY WAY	(Middle)		04	1/13/2	2015			saction (Month/Day/Year)					X Officer (give title Other (specify below)  SVP, Gen Counsel, Secretary					
(Street) NORWO	NORWOOD MA 02062-9106		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
(City)	(3		ble I - Nor	n-Deriv	/ativ	re Se	curi	ties A	Acquired	l Di	snosed	of o	r Ben	eficially	, Owned					
1. Title of Security (Instr. 3)			2. Trans Date	2. Transaction		2A. Deemed Execution Date,		te, 3.	a. 3. 4. Securities Acqui Transaction Disposed Of (D) (Ir Code (Instr.		Acquired	(A) or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
			Code					v	Amoun	t	(A) or (D)	Price	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)			
Comm St	omm Stock-\$.16-2/3 value		04/13	13/2015				M		1,00	1,000		\$37.52	11,	775		D			
Comm Stock-\$.16-2/3 value		04/13	13/2015				M		1,00	00	A	\$31.62	! 12,	775		D				
Comm Stock-\$.16-2/3 value		04/13	13/2015				M		1,00	1,000		\$19.57	13,775		D					
					3/2015			S <sup>(1)</sup>			3,500		\$64.25		275 D		D			
			Table II -						quired, ts, optic						Owned					
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/Ye	ate, T	4. Transaction Code (Instr. 8)		n of Ex		Expiration	6. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisab	le	Expiration Date	Title		Amount or Number of Shares						
Non- Qualified Stock Option (right to buy)	\$37.52	04/13/2015			M			1,000	01/04/201	2 <sup>(2)</sup>	01/04/2021	Stoc	omm k-\$.16- value	1,000	\$0.0000	9,232	2	D		
Non- Qualified Stock Option (right to buy)	\$19.57	04/13/2015			M			1,000	01/05/201	0 <sup>(3)</sup>	01/05/2019	Stoc	omm k-\$.16- value	1,000	\$0.0000	10,00	0	D		
Non- Qualified Stock Option (right to buy)	\$31.62	04/13/2015			M			1,000	01/05/201	1 <sup>(4)</sup>	01/05/2020	Stoc	omm k-\$.16- value	1,000	\$0.0000	2,000	)	D		

## **Explanation of Responses:**

- 1. These shares were disposed of in an open market sale pursuant to a 10b5-1 trading plan adopted by the Reporting Person in accordance with Rule 10b5-1 of the Securities Exchange Act of 1934, as amended.
- 2. This option vests in equal installments on the first, second, third, fourth and fifth anniversaries of the original grant date, which was January 4, 2011.
- 3. This option vested in equal installments on the first, second, third, fourth and fifth anniversaries of the original grant date, which was January 5, 2009.
- 4. This option vested in equal installments on the first, second, third, fourth and fifth anniversaries of the original grant date, which was January 5, 2010.

Cynthia M. McMakin,

Associate General Counsel, by 04/14/2015

Power of Attorney

\*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).