FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL						
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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 Re EVANS BRUCE F  (Last) ONE ANALOG WAY	(First)		Issuer Name and Ticker or Trading Symbol     ANALOG DEVICES INC. [ ADI ]  3. Date of Earliest Transaction (Month/Day/Year) 03/10/2021									Relationship of Reporting Person(s) heck all applicable)  X Director  Officer (give title below)			10% Ow	mer pecify below)		
(Street) WILMINGTON (City)	MA (State)	01 (Zi	887 D)	4	If Amendment, Date of Original Filed (Month/Day/Year)							6. Individ	ndividual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)			Date	nsaction th/Day/Yea	Executi			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispos (D) (Instr. 3, 4 and 5)			Beneficially Owned Following Reported		Direct (D) or Indirect (I) (Ins		7. Nature of Indirect Beneficial	
						(Month	(Month/Day/Year)		v	Amount	unt (A) or (D) Pric		Price	Transaction(s) (Instr. 3 and 4)				Ownership (Instr. 4)
Comm Stock - \$.16-2/3 value				03/	03/10/2021		M		2,210		Α	\$0	92,357.047		D			
Comm Stock - \$.16-2/3 value													106(1)			I	by Evans Investment Management LLC	
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	e (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)		9	7. Title and Amount of Se Underlying Derivative Se 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securiti Benefici Owned Followir	ve es ially	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title		Amount or Number of Shares		Reporte Transac (Instr. 4)	ed ction(s)	1' '	
Restricted Stock Unit (RSU)	\$0.0	03/10/2021		A		1,435		(2)		(2)		Stock - \$.16- 3 value	1,435	\$0	1,43	35	D	
Restricted Stock Unit (RSU)	\$0.0	03/10/2021		М			2,210	(3)		(3)		Stock - \$.16- 3 value	2,210	\$0	0		D	

- 1. On June 10, 2020, the reporting person filed a Form 4 which inadvertently incorrectly reported the number of shares held indirectly and the nature of indirect beneficial ownership. This report corrects the prior inaccuracies.

  2. This RSU vests 100.00% on the earlier of the date of the Company's next Annual Meeting of Shareholder or March 10, 2022. Upon the vesting date, each vested RSU shall automatically convert into one (1) share of common stock of the Company.
- 3. In accordance with the terms of the grant, this RSU vested 100% on March 11, 2021, the date of the Company's 2021 Annual Meeting of Shareholders. Upon the vesting date, each vested RSU automatically converted into one (1) share of common stock of the Company.

## Remarks:

/s/ Eric French, Senior Corporate Counsel, by Power of Attorney \*\* Signature of Reporting Person

03/11/2021

Date

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

 $^{\star}$  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.

### SUBSTITUTE POWER OF ATTORNEY

Pursuant to a written Limited Power of Attorney for Section 16 Reporting Obligations granted by each of the following individuals (colled James A. Champy
Anantha P. Chandrakasan
Martin Cotter
Bruce R. Evans
Edward H. Frank
Laurie H. Glimcher
Karen M. Golz
Joseph Hassett
Gregory N. Henderson
Mark M. Little
Prashanth Mahendra-Rajah
Steve Pietkiewicz
Vincent Roche
Kenton J. Sicchitano
Ray Stata

The undersigned, pursuant to the powers granted in the Powers of Attorney, hereby constitutes and appoints Eric French as substitute to This Substitute Power of Attorney shall remain in full force and effect with respect to each individual listed above, until the underlying the control of the power of Attorney shall remain in full force and effect with respect to each individual listed above, until the underlying the control of the power of Attorney shall remain in full force and effect with respect to each individual listed above, until the underlying the control of the power of Attorney shall remain in full force and effect with respect to each individual listed above, until the underlying the control of the power of Attorney shall remain in full force and effect with respect to each individual listed above, until the underlying the control of the power of Attorney shall remain in full force and effect with respect to each individual listed above, until the underlying the control of the power of Attorney shall remain in full force and effect with respect to each individual listed above, until the underlying the control of the power of Attorney shall remain in full force and effect with respect to each individual listed above.

IN WITNESS WHEREOF, the undersigned has caused this Substitute Power of Attorney to be executed as of this 19th day of January, 2021.

/s/ Margaret K. Seif Signature

Margaret K. Seif Print Name

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