FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.O. 20040	

	OMB APP	ROVAL
1	OMB Number:	2225.0

-1		
	OMB Number:	3235-0287
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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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1936 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Zinsner David					2. Issuer Name and Ticker or Trading Symbol ANALOG DEVICES INC [ADI]							(Chec	(Check all applica		10% C			
(Last) (First) (Middle) P.O. BOX 9106 THEFF TECHNOLOGY WAY					3. Date of Earliest Transaction (Month/Day/Year) 02/17/2009							X	below) "		, Finar	below)		
THREE TECHNOLOGY WAY (Street) NORWOOD MA 02062-9106			02062-9106		4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5	State)	(Zip)															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
D			Transac ate lonth/Da	2A. Deemed Execution Date, if any (Month/Day/Year		Code (Ins	Transaction Disposed Of (D) (Instr. 3, 4 a			Securities Beneficiall Owned Fol		Form:	Direct I Indirect I tr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	/	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and			"	nstr. 4)	
	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year		e and	7. Title and Amount Securities Underlyin Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivativ Securitie Beneficia Owned Following Reported	re Ownersl es Form: ally Direct (C or Indire g (I) (Instr.	Ownership	Beneficial Ownership ct (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisable	Exp Dat	piration te	Title	Amount or Number of Shares		Transaction(s (Instr. 4)					
Non- Qualified Stock Option (right to buy)	\$20	02/17/2009		A		160,000		02/17/2010 ⁽¹⁾	02/	17/2019	Comm Stock-\$.16- 2/3 value	160,000	\$0	160,0	000	D		
Restricted Stock Unit (RSU)	\$0 ⁽²⁾	02/17/2009		A		35,000		(3)		(4)	Comm Stock-\$.16- 2/3 value	35,000	\$0	35,00	00	D		

Explanation of Responses:

- 1. -- This is a vesting schedule. 20% vests one, two, three, four and five years from grant date.
- 2. Upon each vesting date, each vested RSU shall automatically convert into one (1) share of common stock of the Company. Notwithstanding, the Company may elect, in its sole discretion, to deliver cash in lieu of shares of common stock, in an amount equal to the closing price of the common stock on the NYSE on the vesting date.
- 3. This award shall vest in five equal installments on the first, second, third, fourth and fifth anniversaries of the grant date.
- 4. Not Applicable

Remarks:

By: FRANCIS SARRO, Assistant Treasurer, Attny In

02/18/2009

<u>Fact</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.