FORM 4

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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL
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OMB Number: 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* FISHMAN JERALD							2. Issuer Name and Ticker or Trading Symbol ANALOG DEVICES INC [ ADI ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
FISHMAN JERALD														X Directo	r		10% Ow	ner		
(Last)							3. Date of Earliest Transaction (Month/Day/Year) 03/06/2013								(give title	ΕO	Other (s below)	pecify		
P.O. BOX 9106						03/00/2013									CI	20				
ONE TE	CHNOLOG	$\vdash$																		
(Street)					— <b> </b> 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
NORWOOD MA			02062-9106											_	filed by More than One Repo		Ü			
(City) (State) (Zip)														Person						
		Та	ble I - No	on-Der	ivati	ve S	ecur	ities A	cquired	l, Di	sposed o	of, or Be	neficially	/ Owned						
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Execution D			Code (In:					5. Amou Securitie Benefici Owned F	s Form ally (D) o ollowing (I) (II		: Direct r Indirect str. 4)	7. Nature of ndirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3	ion(s)			(Instr. 4)		
Comm Stock-\$.16-2/3 value 03/06/2							013		М		20,000	A	\$37.7	378,945		D				
Comm Stock-\$.16-2/3 value 03/06/2						:013			S		20,000	D	\$46.002	(1) 358	3,945		D			
			Table II								oosed of			Owned						
										s, options, convertible securitie						af   10		I		
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)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		•	7. Title and Amour of Securities Underlying Deriva Security (Instr. 3 a 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owr Forr Dire or Ir (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal	ıble	Expiration Date	Title	Amount or Number of Shares							
Non- Qualified Stock Option (right to buv)	\$37.7	03/06/2013			М			20,000	12/07/200	7 <sup>(2)</sup>	12/07/2014	Comm Stock-\$.16- 2/3 value	20,000	\$0.0000	380,000	0	D			

## **Explanation of Responses:**

1. These shares were disposed of in multiple transactions on March 6, 2013 at actual sales prices ranging from \$46,000 to \$46,090 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 third, fourth and fifth anniversaries the original grant date, which was December 7, 2004.

MARGARET K. SEIF, General Counsel, by Power of Attorney

03/07/2013

\*\* 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.