FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ĮĮ.	OIVIB AP	PROVAL
I	OMB Number:	3235-028

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

l	OIVIB APPRO	VAL							
l	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

1. Name and Address of Reporting Person* FULLER SAMUEL H (Last) (First) (Middle) P.O. BOX 9106						2. Issuer Name and Ticker or Trading Symbol ANALOG DEVICES INC [ADI] 3. Date of Earliest Transaction (Month/Day/Year) 09/22/2011										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) VP, RESEARCH & DEVELOPMENT					
(Street) NORWOOD MA 02062-9106 (City) (State) (Zip)					_	4. If Amendment, Date of Original Filed (Month/Day/Year) ative Securities Acquired, Disposed of, or Benefic										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					saction	2A. Deemed Execution Date,			te,	3. Transaction Code (Instr. 8)		4. Securi Dispose	Securities Acquired (A) obsposed Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Comm Stock-\$.16-2/3 value 09/22/ Comm Stock-\$.16-2/3 value 09/22/										M S	,	5,000 A S		\$	19.89 32.482	(Instr. 3 and 4) 10,040		D D			
		(e.g., d Date, r/Year)	puts 4. Transa	ansaction ode (Instr. 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ts, options, c 6. Date Exercisab Expiration Date (Month/Day/Year)			of Securities Underlying Derivative Securi (Instr. 3 and 4) Am or Nuir		ount rity		9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
Non- Qualified Stock Option (right to	\$19.89	09/22/2011			М		(-)	5,000		24/2004 ⁽¹⁾	T	0/24/2012	Comm Stock-\$.16 2/3 value		,000	\$0.0000	10,00	0	D		

Explanation of Responses:

1. This option vested in equal installments on the second, third, fourth and fifth anniversaries of the original grant date. The option was fully vested as of September 24, 2007 in accordance with its terms.

Kristin S. Caplice, Assistant

General Counsel, by Power of

Attorney

** Signature of Reporting Person

Date

09/26/2011

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.