SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 OMB APPROVAL
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| | | | or bestion bo(if) of the investment boinparty rise of 1540 | | | |
|--|--------------------------------------|-----------|---|------------------------|---|---|
| | ss of Reporting Perso GH JOSEPH E | | 2. Issuer Name and Ticker or Trading Symbol ANALOG DEVICES INC [ADI] | (Check | tionship of Reporting Persor all applicable) Director Officer (give title | n(s) to Issuer 10% Owner Other (specify |
| (Last) P.O. BOX 9106 THREE TECHN | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 10/03/2003 | | below) P, CHIEF FINAN OFCI | below) |
| (Street) NORWOOD (City) | MA (State) | 020629106 | 4. If Amendment, Date of Original Filed (Month/Day/Year) 10/06/2003 | 6. Indiv Line) X | ridual or Joint/Group Filing (Form filed by One Report Form filed by More than C Person | ing Person |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| ······································ | | | | | | | | | | | |
|--|--|---|------------------------------|---|--------|---------------|----------|---|---|---|--|
| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | | | | 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 | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | |
| Comm Stock-\$.16-2/3 value | 10/03/2003 | | М | | 10,000 | A | \$7.375 | 10,000 | D | | |
| Comm Stock-\$.16-2/3 value | 10/03/2003 | | S | | 10,000 | D | \$42.346 | 0 | D | | |
| Comm Stock-\$.16-2/3 value | | | | | | | | 925 | I | By Daughter | |
| Comm Stock-\$.16-2/3 value | | | | | | | | 925 | I | By Daughter 2 | |

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) | | of Deri Sec Acq (A) (Disp of (I | umber vative urities uired or oosed D) (Instr. and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|--|--|--------------------|---|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Non- Qualified Stock Option (right to buy) | \$ 7.375 | 10/03/2003 | | М | | | 10,000 | 09/08/2001 | 12/16/2007 | Comm Stock-\$.16- 2/3 value | 10,000 | \$0 | 45,000 | D | |

Explanation of Responses:

Remarks:

The reporting person previously provided details of the exercise on 10/3/03 using the wrong grant.

| By: WILLIAM A. | <u>MARTIN,</u> |
|------------------|----------------|
| Attorney In Fact | |

10/08/2003

Date

** Signature of Reporting Person

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.