FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

								` '											
Name and Address of Reporting Person* Brennan Seamus M.				2. Issuer Name and Ticker or Trading Symbol ANALOG DEVICES INC [ADI]									tionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner Officer (give title Other (speci			ner			
(Last) (First) (Middle) P.O. BOX 9106					3. Date of Earliest Transaction (Month/Day/Year) 12/03/2010									below) VP, Chief Account		ounting	below)		
THREE	TECHNOL	OGY WAY			4.	If Ame	endme	ent, Date o	of Origina	al File	d (Month/Da	ay/Year)		3. Indiv	/idual or Jo	oint/Group	Filing (C	Check App	licable
(Street) NORWOOD MA 02062-9106			106											Form filed by One Reporting Persorn filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)												r Glauli				
		Ta	ble I - N	on-Der	ivativ	re Se	curi	ties Ac	quire	l, Di	sposed (of, or Be	nefici	ally	Owned				
		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			d 5)	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			12/03/2010					М		6,000	A	\$ 1 9	.89	11,	11,570		D		
Comm St	n Stock-\$.16-2/3 value			12/03/2010					S		6,000	D	\$37.5	37.558(1)		570		D	
Comm St	ock-\$.16-2	/3 value													7-	48		I I	By Trust For the Benefit of Son
Comm Stock-\$.16-2/3 value														1,723		:	I 1	By Trust For the Benefit of Spouse	
			Table II								posed of				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	ed n Date,	4. Transactio Code (Inst		on of I		5. Options, 5. Date Exercisa Expiration Date Month/Day/Yea		able and	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		nt 8	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Ow For Illy Dire or I	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber					
Non- Qualified Stock Option (right to buy)	\$19.89	12/03/2010			M			6,000 (09/24/200	4 ⁽²⁾	09/24/2012	Comm Stock-\$.16- 2/3 value	- 6,0	00	\$0.0000	12,000	0	D	

Explanation of Responses:

- 1. These shares were disposed of in multiple transactions on December 3, 2010 at an actual sales price ranging from \$37.550 to \$37.560 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.
- $2. This is a vesting schedule. \ 100.00\% \ vests \ one \ year \ from \ the \ original \ grant \ date. \ The \ option \ is \ fully \ vested \ as \ of \ September \ 28, \ 2010 \ in \ accordance \ with \ its \ terms.$

FRANCIS SARRO, Assistant
Treasurer, by Power of 12/07/2010

Attorney

** 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.