## Edgar Filing: ANALOG DEVICES INC - Form 4

ANALOG I Form 4 April 25, 20	DEVICES INC										
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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer white the STATEMENT O			F CHAN	IGES IN	BENEF	TICL	AL OW	ERSHIP OF	Expires:	January 31, 2005	
subject section			SECUI		ICII			Estimated a burden hou			
Form 4 or Form 5 obligations may continue.Contract of point responseO.5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19400.5											
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Real Peter			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(Last) (First) (Middle) 3. Date of Earliest Transaction			(Chec	Check all applicable)						
(			(Month/Day/Year)					Director 10% Owner X_ Officer (give title Other (specify			
	9106, ONE LOGY WAY		04/24/2017					below) below) SVP & Chief Technology Officer			
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
Filed(N NORWOOD, MA 02062-9106				(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	e Secu	rities Acc	uired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any				5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
				Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)			
Comm Stock - \$.16-2/3 value	04/24/2017			M	3,000	A	\$ 31.62	12,026	D		
Comm Stock - \$.16-2/3 value	04/24/2017			S <u>(1)</u>	3,000	D	\$ 80	9,026	D		
Comm Stock - \$.16-2/3 value								218	I	in Analog Ireland Success Sharing	

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

#### 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. Transactio Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		7. Title and Amo of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	An or Nu of Sha
Non-Qualified Stock Option (right to buy)	\$ 31.62	04/24/2017		М	3,000	01/05/2011(2)	01/05/2020	Comm Stock - \$.16-2/3 value	3,

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Real Peter P.O. BOX 9106 ONE TECHNOLOGY WAY NORWOOD, MA 02062-9106			SVP & Chief Technolog	y Officer			
Signatures							
/s/ Cynthia M. McMakin, Asso Attorney	ciate Gen	eral Counsel	, by Power of	04/25/2017			

\*\*Signature of Reporting Person

# **Explanation of Responses:**

- \* 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).
- These shares were disposed of in an open market sale pursuant to a 10b5-1 trading plan adopted by the Reporting Person in accordance (1)with Rule 10b5-1 of the Securities Exchange Act of 1934, as amended.

Share Plan

04/25/2017

Date

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(2) This option vested in equal installments on the first, second, third, fourth and fifth anniversaries of the original grant date, which was January 5, 2010.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.