ANALOG DEVICES INC

Form 4

December 09, 2004

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB

Expires:

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

3235-0287 Number: January 31,

OMB APPROVAL

Section 16. Form 4 or Form 5

SECURITIES

2005 Estimated average burden hours per

obligations may continue. See Instruction

Filed 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 1940

response... 0.5

10% Owner

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * **GIUDICE WILLIAM**

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

(First)

(Street)

ANALOG DEVICES INC [ADI]

(Check all applicable)

VP & GEN MGR, MCRO PROD DIV

(Middle) 3. Date of Earliest Transaction

12/07/2004

Director

PO BOX 9106, THREE

(Month/Day/Year)

X_ Officer (give title Other (specify below)

TECHNOLOGY WAY

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

(Zip)

Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

NORWOOD, MA 020629106

(City) (State) 2. Transaction Date 2A. Deemed

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

1. Title of Security (Instr. 3)

(Month/Day/Year)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned

7. Nature of Ownership Form: Direct (D) or Indirect

Indirect Beneficial Ownership (Instr. 4)

(9-02)

(A)

Following Reported Transaction(s)

(I)(Instr. 4)

(Instr. 3 and 4)

or Code V Amount (D) Price

Comm

Stock-\$.16-2/3 value

30

D

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 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)

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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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Ar Underlying Se (Instr. 3 and 4)
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title
Non-Qualified Stock Option (right to buy)	\$ 37.7	12/07/2004		A	65,000	12/07/2007(1)	12/07/2014	Comm Stock-\$.16- value
Non-Qualified Stock Option (right to buy)	\$ 23.74					02/03/2004(2)	02/03/2013	Comm Stock-\$.16- value
Non-Qualified Stock Option (right to buy)	\$ 37.38					06/02/2005(3)	06/02/2013	Comm Stock-\$.16- value
Non-Qualified Stock Option (right to buy)	\$ 45.27					12/10/2006(1)	12/10/2013	Comm Stock-\$.16- value

Reporting Owners

Reporting Owner Name / Address	Relationsnips						
2	Director	10% Owner	Officer	Other			
GIUDICE WILLIAM			VP & GEN				
PO BOX 9106							
THREE TECHNOLOGY WAY			MGR, MCRO				
NORWOOD, MA 020629106			PROD DIV				

Signatures

By: WILLIAM A. MARTIN, Attny

In Fact 12/07/2004

**Signature of Reporting Person Date

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).
- (1) This is a vesting schedule. 33.33% vests three, four and five years from grant date.
- (2) This is a vesting schedule. 20% vests one, two, three, four and five years from grant date.
- (3) This is a vesting schedule. 100% vests two years from grant date.

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.

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