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Real Peter Form 4 May 31, 20 FORN Check th if no lor subject to Section Form 4 Form 5 obligation may con <i>See</i> Inst 1(b).	A 4 UNITED his box hger to 16. or StateM Filed pur Section 17(AENT OF CH suant to Section (a) of the Public	Washington, IANGES IN I SECUR on 16(a) of the	D.C. 20 BENEF ITIES e Securi ling Cor)549 ICIA ties H	AL OW Exchang y Act o	COMMISSION NERSHIP OF e Act of 1934, f 1935 or Section 40	OMB Number: Expires: Estimated a burden hou response	irs per	
1. Name and Address of Reporting Person <u>*</u> Real Peter			2. Issuer Name and Ticker or Trading Symbol ANALOG DEVICES INC [ADI]				5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) P.O. BOX 9106, ONE TECHNOLOGY WAY			3. Date of Earliest Transaction (Month/Day/Year) 05/30/2018				(Check all applicable) <u></u> Director <u>X</u> Officer (give title <u></u> 10% Owner <u></u> Other (specify below) SVP & Chief Technology Officer			
			4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State)	(Zip)	Table I - Non-D	erivative	Secu	rities Acc	uired, Disposed of	, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed	ed 3. 4. Securities Acquired Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) ay/Year) (Instr. 8) (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of			
Comm Stock - \$.16-2/3 value	05/30/2018			4,595	(D) A	Price \$ 39.79	18,195	D		
Comm Stock - \$.16-2/3 value	05/30/2018		S <u>(1)</u>	4,595	D	\$ 93.07	13,600	D		
Comm Stock - \$.16-2/3 value							218	I	in Analog Ireland Success Sharing	

Share Plan

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 on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	ivative Expiration Date ties (Month/Day/Year) red		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)	\$ 39.79	05/30/2018		М	4,595	03/15/2013 <u>(2)</u>	03/15/2022	Comm Stock - \$.16-2/3 value	4,

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Real Peter P.O. BOX 9106 ONE TECHNOLOGY WAY NORWOOD, MA 02062-9106			SVP & Chief Technology	/ Officer			
Signatures							
/s/ Cynthia M. McMakin, Assis Attorney	by Power of	05/31/2018					
<u>**</u> Signature	e of Reporting	g Person		Date			

**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.

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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 March 15, 2012.

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.