GIUDICE WILLIAM

Form 4

January 07, 2005

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number:

3235-0287

OMB APPROVAL

Expires:

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if no longer subject to Section 16. Form 4 or Form 5

Check this box

SECURITIES obligations may continue.

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 See Instruction

1(b).

(Print or Type Responses)

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

2. Issuer Name and Ticker or Trading Symbol

ANALOG DEVICES INC [ADI]

5. Relationship of Reporting Person(s) to

Issuer

(Last)

(City)

(First)

(Street)

(State)

(Middle)

(Zip)

3. Date of Earliest Transaction

(Month/Day/Year)

01/07/2005

(Check all applicable)

Director _X__ Officer (give title below)

10% Owner Other (specify

VP & GEN MGR, MCRO PROD DIV

PO BOX 9106, THREE **TECHNOLOGY WAY**

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

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

NORWOOD, MA 020629106

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1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transactio	4. Securi		•	5. Amount of Securities	6. Ownership	7. Nature of Indirect
(110111 0)	(110111112 11)	any (Month/Day/Year)	Code (Instr. 8)	, , ,		Beneficially Owned Following	Form: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)	
Comm Stock-\$.16-2/3 value	01/07/2005		M	3,000	, ,		3,000	D	
Comm Stock-\$.16-2/3 value	01/07/2005		S	3,000	D	\$ 35.75	0	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 (9-02)required to respond unless the form displays a currently valid OMB control number.

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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. Transactic Code (Instr. 8)	Secur Acqui (A) or	rivative rities ired r osed of	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo Underlying Secu (Instr. 3 and 4)
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title
Non-Qualified Stock Option (right to buy)	\$ 23.74	01/07/2005		M		3,000	02/03/2004(1)	02/03/2013	Comm Stock-\$.16-2 value
Non-Qualified Stock Option (right to buy)	\$ 37.38						06/02/2005(2)	06/02/2013	Comm Stock-\$.16-2 value
Non-Qualified Stock Option (right to buy)	\$ 45.27						12/10/2006(3)	12/10/2013	Comm Stock-\$.16-2 value
Non-Qualified Stock Option (right to buy)	\$ 37.7						12/07/2007(3)	12/07/2014	Comm Stock-\$.16-2 value

Reporting Owners

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

Signatures

By: WILLIAM A. MARTIN, Attny

In Fact 01/07/2005

**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).
- $\textbf{(1)} \quad \text{This is a vesting schedule. 20\% vests one, two, three, four and five years from grant date.}$
- (2) This is a vesting schedule. 100% vests two years from grant date.

Reporting Owners 2

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(3) This is a vesting schedule. 33.33% vests three, four and five 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.