Edgar Filing: Golz Karen - Form 4

Golz Karen

Form 4												
March 14, 2	019											
FORM 4 UNITED STATES SECURE					ITIES AND EXCHANGE COMMISSION					OMB APPROVAL		
	UNITED	STATES		RITIES A shington,			NGE	COMMISSION	OMB Number:	3235-0287		
Check th	der.								Expires:	January 31,		
Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHIP SECURITIES					Estimated burden hou response	urs per		
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17(a	a) of the I	Public U		ling Con	npany	Act of	ge Act of 1934, of 1935 or Sectio 940	on			
(Print or Type	Responses)											
Golz Karen Symbo			Symbol	Name and			0	5. Relationship of Reporting Person(s) to Issuer				
(*)		ANALOG DEVICES I				(Che			ck all applicable)			
(Month ONE TECHNOLOGY WAY (Street) 4. If Ar Filed(M			3. Date of (Month/D 03/13/2	-	ansaction			X_ Director10% Owner Officer (give title below) Other (specify below)				
				Amendment, Date Original (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				
NORWOO	D, MA 02062							Person		oporting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Ac	equired, Disposed o	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deen Execution any (Month/E	n Date, if	3. Transactic Code (Instr. 8) Code V	Disposed (Instr. 3,	l (A) o l of (D 4 and (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 Indirect Beneficial Ownership (Instr. 4)		
Comm Stock - \$.16-2/3 value	03/13/2019			М		A	\$ 0	1,504	D			

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

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 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. Transacti Code (Instr. 8)	orDerivati Securitie Acquire Dispose	Derivative Expira Securities (Mont Acquired (A) or Disposed of (D) (Instr. 3, 4, and		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Unit (RSU)	\$ 0	03/13/2019		А	2,035		<u>(1)</u>	(1)	Comm Stock - \$.16-2/3 value	2,035	
Restricted Stock Unit (RSU)	\$ 0	03/13/2019		М		1,504	03/13/2019 <u>(2)</u>	(2)	Comm Stock - \$.16-2/3 value	1,504	

Reporting Owners

Reporting Owner Name / Address		Relationsh						
	Director	10% Owner	Officer	Other				
Golz Karen ONE TECHNOLOGY WAY NORWOOD, MA 02062	Х							
Signatures								
/s/ Cynthia M. McMakin, Assistant General Counsel, by Power of Attorney								

**Signature of Reporting Person

03/14/2019

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 RSU vests 100.00% on the earlier of the date of the Company's next Annual Meeting of Shareholders, or March 13, 2020. Upon the vesting date, each vested RSU shall automatically convert into one (1) share of common stock of the Company.
- (2) In accordance with the terms of the grant, this RSU vested 100.00% on March 13, 2019, the date of the Company's 2019 Annual Meeting of Shareholders. Upon the vesting date, each vested RSU automatically converted into one (1) share of common stock of the Company.

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.