| SEC Form 4 | |
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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
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| Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |
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| or Section 30(b) of the Investment Company Act of 1940 |

| 1. Name and Addre <u>Puccio Richa</u> | ss of Reporting Perso . <u>rd C Jr</u> | n [*] | 2. Issuer Name and Ticker or Trading Symbol <u>ANALOG DEVICES INC</u> [ADI] | | tionship of Reporting Per all applicable) Director | 10% Owner | | | | |
|--|---|----------------|--|------------------------|--|--------------------------|--|--|--|--|
| (Last) C/O ANALOG | (First) DEVICES, INC. | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2024 | X | Officer (give title below) EVP and C | Other (specify below) | | | | |
| 1 ANALOG WAY | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | , | | | | | |
| (Street) WILMINGTON | I MA | 01887 | | | Form filed by More tha Person | in One Reporting | | | | |
| (City) | (State) | (Zip) | Rule 10b5-1(c) Transaction Indication | | | | | | | |
| | | | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---|--|---|--------------|---|---|---------------|-------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |

| | | | (e.g., p | outs, | calls, | warra | ints, | options, | convertib | le sec | urities) | | | | |
|---|---|--|---|------------------------------|--------|--|-------|---|--------------------|---|--|-----|--|--|--|
| 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. Transa Code (8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration Date Amount of Month/Day/Year) Securities Underlying Derivative | | | nount of Derivative curities Security iderlying (Instr. 5) rivative curity (Instr. 3 | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Restricted Stock Unit (RSU) | \$0 | 03/15/2024 | | A | | 53,121 | | (1) | (1) | Comm Stock - \$.16- 2/3 value | 53,121 | \$0 | 53,121 | D | |

Explanation of Responses:

1. The RSUs granted to the Reporting Person on March 15, 2024 vest in equal installments on the first, second and third anniversaries of March 15, 2024. Upon each vested RSU shall automatically convert into one (1) share of common stock of the Company.

Remarks:

| /s/ Shelly Shaw, General | |
|-------------------------------|---|
| Counsel, by Power of Attorney | y |

03/19/2024

** Signature of Reporting Person Date

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

 * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.