### Edgar Filing: MAXIM INTEGRATED PRODUCTS INC - Form 4

#### MAXIM INTEGRATED PRODUCTS INC

Form 4 September 04, 2008

Check this box

if no longer

subject to

Section 16.

#### **OMB APPROVAL**

January 31,

0.5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB** 3235-0287 Number:

> Expires: 2005 Estimated average

> > 10% Owner

Other (specify

burden hours per response...

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Washington, D.C. 20549

Form 4 or Form 5 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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

**MEDLIN EDWIN** 

2. Issuer Name and Ticker or Trading

Symbol

MAXIM INTEGRATED PRODUCTS INC [MXIM]

3. Date of Earliest Transaction

(Check all applicable)

Vice President

5. Relationship of Reporting Person(s) to

(Last) (First) (Middle)

(Month/Day/Year) 09/02/2008

Director X\_ Officer (give title below)

C/O MAXIM INTEGRATED PRODUCTS, INC, 120 SAN **GABRIEL DRIVE** 

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

3.

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

SUNNYVALE, CA 94086

(City) (State)

(Zip)

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

Issuer

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

(Month/Day/Year)

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

4. Securities

5. Amount of Securities Beneficially Owned Following Reported

Transaction(s)

6. Ownership 7. Nature of Form: Direct (D) or Indirect (I) (Instr. 4)

Indirect Beneficial Ownership (Instr. 4)

(9-02)

(A)

(Instr. 3 and 4) Price (D)

Common Stock

09/02/2008

Code V Amount 1,356 Α (1)

\$0 28,772 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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	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transact Code (Instr. 8)	orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	<b>:</b>		Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
<b>FB</b>	Director	10% Owner	Officer	Other			
MEDLIN EDWIN							
C/O MAXIM INTEGRATED PRODUCTS, INC			Vice				
120 SAN GABRIEL DRIVE			President				
SUNNYVALE, CA 94086							

# **Signatures**

By: Mark Casper For: Edwin
Medlin

09/04/2008

\*\*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) Represents 1,356 Restricted Stock Units that vest in equal installments over five quarters with the first vesting on 11/15/2008, subject to the individual's continuous status as an employee, director or consultant through such dates

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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