Rhode Jason P Form 4 February 09, 2009

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

obligations

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

may continue. See Instruction

1(b).

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Rhode Jason P

2. Issuer Name and Ticker or Trading Symbol

CIRRUS LOGIC INC [CRUS]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

OMB APPROVAL

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

(Month/Day/Year)

(Last) (First) (Middle)

(State)

3. Date of Earliest Transaction

_X__ Director 10% Owner X_ Officer (give title

2901 VIA FORTUNA

02/09/2009

Other (specify below) President & CEO

6. Individual or Joint/Group Filing(Check

(Street) 4. If Amendment, Date Original

(Zip)

Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

AUSTIN, TX 78746

(City)

| (City) | (State) (Z | Zip) Table | I - Non-D | erivative S | Securi | ities Acq | uired, Disposed o | of, or Beneficial | ly Owned |
|------------------------|--------------------------------------|-------------------------------|-----------------|---|-----------|---------------|--|--------------------------------------|---------------------------------------|
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | | 4. Securities Acquired on(A) or Disposed of | | | 5. Amount of Securities | Form: Direct | Indirect |
| (Instr. 3) | | any (Month/Day/Year) | Code (Instr. 8) | (D) (Instr. 3, 4 and 5) | | | Owned Ind | (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | (A) or | | Reported Transaction(s) (Instr. 3 and 4) | , , | |
| Common Stock | 02/09/2009 | | Code V P | Amount 1,800 | () | Price \$ 3.27 | 3,412 | D | |
| Common Stock | 02/09/2009 | | P | 2,400 | A | \$ 3.3 | 5,812 | D | |

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

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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 | 2. Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. Transacti | 5. orNumber | 6. Date Exerc Expiration D | | 7. Title Amount | | 8. Price of Derivative | 9. Nu Deriv |
|------------------------|--|--------------------------------------|-------------------------------|--------------------|----------------|-------------------------------|--------------------|----------------------------------|--|------------------------|---|
| Security (Instr. 3) | or Exercise Price of Derivative Security | (Month/Day/Tear) | any (Month/Day/Year) | Code (Instr. 8) | of | (Month/Day/ | | Underly Securiti (Instr. 3 | ying ies | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title N | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Telusion po | | | | | | |
|--------------------------------|-------------|-----------|------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Rhode Jason P | | | | | | | |
| ACCA TITA ECDETINA | T 7 | | D 11 0 000 | | | | |

2901 VIA FORTUNA X President & CEO AUSTIN, TX 78746

Signatures

Jason P. Rhode 02/09/2009

**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).

Relationships

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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