ALTERA CORP Form SC 13G February 07, 2014

SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549

SCHEDULE 13G

INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT TO RULES 13d-1(b), (c), AND (d) AND AMENDMENTS THERETO FILED PURSUANT TO RULE 13d-2

(AMENDMENT NO.)*

Altera Corporation

(Name of Issuer)

Common Stock

(Title of Class of Securities)

021441100

(CUSIP Number)

12/31/2013

(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

Х	Rule 13d-1(b)
0	Rule 13d-1(c)
0	Rule 13d-1(d)

*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

Page 1 of 4 Pages

Edgar Filing: ALTERA CORP - Form SC 13G

CUSIP NO	. 02144110	0	13G	Page 2 of 4 Pages	
1.	NAME OF REPORTING PERSONS				
Massachus	etts Financia	l Services	Company ("MFS")		
2. (SEE INST	RUCTIONS		THE APPROPRIATE BOX IF A MEN	MBER OF A GROUP	
a) o	(b)	0			
Not Applic	able				
3.			SEC USE ONLY		
4.			CITIZENSHIP OR PLACE OF ORGA	ANIZATION	
Delaware					
NUMBER	OF SHARE	S BENEF	ICIALLY OWNED BY EACH REPOR	RTING PERSON WITH:	
5.			SOLE VOTING POWER	R	
15,643,645	shares of co	ommon sto	ck		
6.			SHARED VOTING POWE	ER	
None					
7.			SOLE DISPOSITIVE POW	'ER	
17,405,684	shares of co	ommon sto	ck		
8.			SHARED DISPOSITIVE PO	WER	
None					
9.	AGGREC	GATE AM	OUNT BENEFICIALLY OWNED BY	EACH REPORTING PERSON	
17,405,684 non-reporti		ommon sto	ock, consisting of shares beneficially ov	vned by MFS and/or certain other	
	TIF THE AC JCTIONS)	GGREGAT	TE AMOUNT IN ROW (9) EXCLUDE	ES CERTAIN SHARES (SEE	
Not Applic	able				

11. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0

12.	TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)

IA

5.4

Schedul	e 13G		Page 3 of 4 Pages	
ITEM 1	:	(a)	NAME OF ISSUER:	
See Cov	er Page			
(b)	ADDRESS O	F ISSUER'S PRINCIPAL	EXECUTIVE OFFICES:	
	ovation Drive e, California 95	134		
ITEM 2	:	(a)	NAME OF PERSON FILING:	
See Iten	n 1 on page 2			
	(b)	ADDRESS OF PRINCI	PAL BUSINESS OFFICE OR, IF NONE, RESIDENCE:	
	ntington Avenue MA 02199	e		
(c)	CITIZENSHIP:			
See Iten	n 4 on page 2			
(d)	TITLE OF CLASS OF SECURITIES:			
See Cov	er Page			
(e)	CUSIP NUMBER:			
See Cov	er Page			
ITEM 3 Rule 13	: d-1(b)(1)(ii)(E)		is an investment adviser in accordance with	
ITEM 4	:		OWNERSHIP:	
(a)	AMOUNT BI	ENEFICIALLY OWNED:		
See Iten	n 9 on page 2			
(b)	PERCENT O	F CLASS:		
See Iten	n 11 on page 2			
	ADED OF SUA		CU DEDGON UAG VOTING AND DIGDOGITIVE DOWE	

(c)NUMBER OF SHARES AS TO WHICH SUCH PERSON HAS VOTING AND DISPOSITIVE POWERS (SOLE AND SHARED):

See Items 5-8 on page 2

ITEM 5: OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS:

0

Schedule 13G	Page 4 of 4 Pages			
ITEM 6:	OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON:			
Not Applicable				
 IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH ACQUIRED THE SECURITY BEING REPORTED ON BY THE PARENT HOLDING COMPANY OR CONTROL PERSON: 				
Not Applicable				
ITEM 8:	IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP:			
Not Applicable				
ITEM 9:	NOTICE OF DISSOLUTION OF GROUP:			
Not Applicable				
ITEM 10:	CERTIFICATIONS:			

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: February 7, 2014

Massachusetts Financial Services Company

By: /s/ DANIEL W. FINEGOLD Daniel W. Finegold Vice President and Assistant Secretary