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MKS INSTR	UMENTS INC	2									
Form 4											
January 30, 2											PROVAL
					AITIES AND EXCHANGE COMMISS Shington, D.C. 20549					OMB Number:	3235-0287
Check this box if no longer subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHIP (SECURITIES						Lanuary 31Expires:2005Estimated averageburden hours perresponse0.5	
Form 5 obligatior may conti <i>See</i> Instru 1(b).	inue. Section 17	7(a) of the		ility H	Iold	ing Con	npany	Act of	e Act of 1934, f 1935 or Section 40	1	
(Print or Type R	Responses)										
BERTUCCI JOHN R Symbol MKS IN			r Name and Ticker or Trading NSTRUMENTS INC [MKSI]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			endment, Date Original nth/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
ANDOVER	, MA 01810								Form filed by M Person	lore than One Re	porting
(City)	(State)	(Zip)	Tabl	e I - No	n-De	erivative	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any		3.	actio 8)		ties Ac isposed 4 and 3 (A) or	equired l of	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
Common Stock	01/22/2015			G		36,000		\$0	327,245.548	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)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transact	5. ionNumbe	6. Date Exer r Expiration I		7. Title Amount		8. Price of Derivative	9. Nu Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Underly	ing	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)				Securiti		(Instr. 5)	Bene
	Derivative				Securit			(Instr. 3	and 4)		Owne
	Security				Acquire	ed					Follo
					(A) or						Repo
					Dispose	ed					Trans
					of (D)						(Instr
					(Instr. 3						
					4, and 5))					
				Code V	(A) (I	D) Date	Expiration	Title A	mount		
						Exercisable	Date	0	r		
								N	Jumber		
								0	f		
								S	hares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
hoporting o which i tanto / i taut ess	Director	10% Owner	Officer	Other			
BERTUCCI JOHN R 2 TECH DRIVE ANDOVER, MA 01810	Х						
Signatures							
/s/Renee M. Donlan POA	01/30/20	15					
**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).

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.