#### BERTUCCI JOHN R

Form 4 May 25, 2006

### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION ON Washington, D.C. 20549

OMB Number: 3235-0287

Estimated average

burden hours per

5. Relationship of Reporting Person(s) to

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue.

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

2. Issuer Name and Ticker or Trading

response... 0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

See Instruction

BERTUCCI JOHN R			ol	Issuer					
a a a a a a a a a a a a a a a a a a a			INSTRUMENTS INC [MKSI]	(Check all applicable)					
(Last)	(First)		e of Earliest Transaction	W D' .	37	10% 0			
90 INDUSTRIAL WAY			h/Day/Year) h/2006	_X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below)  Executive Chairman					
(Street)			mendment, Date Original	6. Individual or Joint/Group Filing(Check					
WILMINGTON, MA 01887			Filed(Month/Day/Year)  Applicable Line)  _X_ Form filed by One Reporting Pers  Form filed by More than One Repo						
WILMINGTON, MA 01887				Person					
(City)	(State)	(Zip)	able I - Non-Derivative Securities Acq	uired, Disposed o	of, or Benefic	ially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or Code V Amount (D) Price	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 Indirect Beneficial Ownership (Instr. 4)			
Common	05/24/2006		$S_{\underline{(1)}}$ 100,000 D $\begin{array}{c} \$ \\ 20.35 \end{array}$	4,146,784	I	By Spouse			
Common				4,111,580	D				
Common				471	I	By Limited Partnership			
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.

### Edgar Filing: BERTUCCI JOHN R - Form 4

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title a		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		onNumber	Expiration D		Amount		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	_	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities	S		(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	,				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(IIISti
					4, and 5)						
					4, and 3)						
								A	mount		
						D.	E	OI	r		
							Expiration Date	Title N	umber		
								01			
				Code V	(A) (D)				hares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
• 0	Director	10% Owner	Officer	Other		
BERTUCCI JOHN R 90 INDUSTRIAL WAY WILMINGTON, MA 01887	X	X	Executive Chairman			

## **Signatures**

By: Joseph M.Tocci
/ POA

\*\*Signature of Reporting

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) The transactions reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan previously adopted by the reporting person. 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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