BERTUCCI JOHN R

Form 4 May 05, 2010

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

5 Relationship of Reporting Person(s) to

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

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

Check this box

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).

Stock

(Print or Type Responses)

1 Name and Address of Reporting Person *

BERTUCCI JOHN R			2. Issuer Name and Ticker or Trading Symbol MKS INSTRUMENTS INC [MKSI]					Issuer (Check all applicable)				
												(Last)
2 TECH DRIVE			(Month/Day/Year) 05/03/2010				X Director Officer (giv below)		6 Owner er (specify			
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
ANDOVER, MA 01810			Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Da		ed	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year		Execution Date, if		* * * *				Securities Form: Direct Indirect			
(Instr. 3)		any (Month/Da	v/Vear)	Code (Instr. 8)	(Instr. 3,	`	·	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(Wollding Da	iyi Tear)	(111511.0)	(msu. 3,	i ana	3)	Following	(Instr. 4)	(Instr. 4)		
						(A) or		Reported Transaction(s) (Instr. 3 and 4)				
C				Code V	Amount	(D)	Price	,				
Common	05/03/2010			$A_{\underline{(1)}}$	6,000	A	\$0	569,369	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 (9-02)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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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title a	nd 8.	. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	iorNumber	Expiration D	Date	Amount of	of D	erivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Underlyii	ng S	ecurity	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivati	ve		Securities	s (I	(nstr. 5)	Bene
	Derivative		•		Securitie	es		(Instr. 3 a	and 4)		Own
	Security				Acquire	d					Follo
	•				(A) or						Repo
					Dispose	d					Trans
					of (D)						(Instr
					(Instr. 3,	•					·
					4, and 5)					
				C 1 1	(A) (D)	. D.	F	m: 1 A	,		
				Code V	(A) (D	·	Expiration				
						Exercisable	Date	or			
									ımber		
								of			
								Sh	ares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
BERTUCCI JOHN R 2 TECH DRIVE ANDOVER, MA 01810	X						

Signatures

/s/Renee M.
Donlan POA
05/05/2010

**Signature of Reporting Date
Person

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) This RSU grant fully vests on the day prior to the first annual meeting of shareholders following the date of grant (or if no such meeting is held within 13 months after the date of grant, on the 13 month anniversary of the date of grant).

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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