FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

5. Relationship of Reporting Person(s) to Issuer

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person\*

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

SMITH JOHN ALEXANDER				KS INSTRUM	<u>1ENT</u>	S IN	<u>IC</u> [ MKS		Director Officer (give title	10% (			
(Last) 2 TECH DRIVI	(First)		Date of Earliest Trans $\frac{16}{2010}$	saction (	Month	n/Day/Year)	X	Officer (give title Other (specify below)  V.P. & Chief Tech Officer					
(Street) ANDOVER (City)	MA (State)	01810 (Zip)	4. If	f Amendment, Date o	of Origin	al File	d (Month/Day	//Year)	6. Indi Line)	,			
		Table I - N	on-Derivative	Securities Acc	quirec	l, Dis	sposed of	, or Be	neficially	Owned			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
					Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock			03/16/2010		M		1,633	A	\$0	1,633	D		
Common Stock			03/16/2010		M		1,166	A	\$0	2,799	D		
Common Stock			03/16/2010		F(1)		890	D	\$19.29	1,909	D		

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned nute calle warrante ontione convertible securities

1,909

	(e.g., puts, cails, warrants, options, convertible securities)														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Unit	(3)	03/16/2010		M			1,633	(4)	(4)	Common Stock	1,633	\$0	11,424	D	
Restricted Stock Unit	(3)	03/16/2010		M			1,166	(5)	(5)	Common Stock	1,166	\$0	9,001	D	

## **Explanation of Responses:**

Common Stock

- $1. \ This \ transaction \ was \ effected \ pursuant \ to \ a \ Rule \ 10b5-1 \ trading \ plan \ previously \ adopted \ by \ the \ reporting \ person.$
- 2. This transaction was executed in multiple trades at prices ranging from \$19.17 to 19.173. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide, upon request, the full information regarding the number of shares and prices at which the transaction was effected
- 3. Each restricted stock unit represents the contingent right to receive one share of common stock of MKS Instruments, Inc.
- 4. These RSUs are subject to the achievement of performance criteria determined in the first year of the grant and thereafter vests in equal annual installments over three years.
- 5. The RSUs vest in equal annual installments over three years.

/s/Renee M. Donlan POA 03/18/2010

\*\* Signature of Reporting Person

\$19.17(2)

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

- \* 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).

03/17/2010

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.