| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See |
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| Instruction 1(b). |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPROVAL | | | | | | | | | |
|----------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average bu | urden | | | | | | | | |

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|---|--------------------------|-----|
| | hours per response: | 0.5 |
| | Estimated average burden | |

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| | | | 2. Issuer Name and Ticker or Trading Symbol <u>MKS INSTRUMENTS INC</u> [MKSI] | | ionship of Reporting I all applicable) Director | Person | rson(s) to Issuer | |
|----------------------------------|---------------------------------|---------------------|---|-------------------------|--|--------|-----------------------|--|
| (Last) 90 INDUSTRIAI | (First) (Middle) USTRIAL WAY | | 3. Date of Earliest Transaction (Month/Day/Year) 11/08/2006 | | Officer (give title below) | | Other (specify below) | |
| (Street) WILMINGTON (City) | MA (State) | 01887 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indivi Line) X | dual or Joint/Group F Form filed by One F Form filed by More f Person | eport | ing Person | |
| | Tá | able I - Non-Deriva | tive Securities Acquired, Disposed of, or Benefi | cially C | Dwned | | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|------------------------------|---|--|---------------|---------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130. 4) |
| Common | 11/08/2006 | | S | | 100,000 | D | \$21.27 | 3,546,784 | D | |
| Common | | | | | | | | 3,511,580 | Ι | By Spouse |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, 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. Transaction Code (Instr. 8) | | ansaction of ode (Instr. Derivative | | | Expiration Date (Month/Day/Year) S | | | Expiration Date | | | Expiration Date (Month/Day/Year) | | | Expiration Date (Month/Day/Year) | | | Expiration Date Amou | | | 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 | | | | | | | | | | | | | | | | |

Explanation of Responses:

<u>By: Joseph M.Tocci / POA</u>

** Signature of Reporting Person Date

<u>11/08/2006</u>

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).

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.