FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549	
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Check this box if no longer subject	
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Inatorian 1/h)	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response:	0.5							

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

1. Name and Address of Reporting Person*  Donahue Joseph B				2. Issuer Name and Ticker or Trading Symbol MKS INSTRUMENTS INC [ MKSI ]							(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner								
(Last)	(Fir	st) (N	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/07/2024								Office below	er (give title v)		Other (s below)	pecify		
C/O MKS INSTRUMENTS, INC. 2 TECH DRIVE, SUITE 201				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person								
(Street) ANDOVER MA 01810														Form filed by More than One Reporting Person						
(City)	(St	,	Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									ded to						
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or E	3ene	eficiall	y Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Execution Da		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			(A) or 3, 4 and		ties cially I Following	6. Owner Form: Di (D) or Ind (I) (Instr.	rect direct l	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D) Pric		Price	Report Transa (Instr.	ed ction(s) 3 and 4)			(Instr. 4)	
Common	Stock			05/07/2	2024			<b>A</b> <sup>(1)</sup>		1,621.79	97 A		(2)	8,871.406		D				
	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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			Transaction Code (Instr. 8)  Sect Acquire (A) of Disp of (D		osed ) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/Y		ite	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or	ount nber res						

## **Explanation of Responses:**

- 1. These restricted stock units become fully vested 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).
- 2. Each restricted stock unit represents the contingent right to receive one share of common stock of MKS Instruments, Inc.

/s/ M. Kathryn Rickards, 05/08/2024 attorney-in-fact

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.