## FORM 4

obligations may continue. See Instruction 1(b).

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

Washington, I	D.C.	20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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OMB APPROVAL OMB Number: 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*  KLIMM ROBERT L					2. Issuer Name and Ticker or Trading Symbol  MKS INSTRUMENTS INC [ MKSI ]										heck all ap Dire	plicable)		Ssuer Owner (specify
(Last) 90 INDU	(F STRIAL V	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/15/2006								beid	,	below eral Manager	)	
(Street) WILMIN (City)	GTON M		01887 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Lir	ne) X Fori Fori	or Joint/Group Filing (Check Applicable rm filed by One Reporting Person rm filed by More than One Reporting rson				
		Tab	le I - Noi	n-Deriv	ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, or E	3ene	ficia	lly Own	ed		
Date					Day/Year)   Exe		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4			d Secu Bene	ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or	Price	Trans	action(s) . 3 and 4)		(111501.44)
Common				06/15	5/2006				S <sup>(1)</sup>		1,558	3 ]	D	\$19.	\$19.75 10,000.38 D			
		Ta									sed of, onvertib				Owned	I		
1. Title of Derivative Security (Instr. 3)  2. Conversi or Exerci Price of Derivativ Security			3A. Deemed Execution Date if any (Month/Day/Ye	Date,	Code (Inst				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Num of Shar					

## **Explanation of Responses:**

1. Employee Stock Option Plan

By: Joseph M.Tocci / POA 06/15/2006

\*\* Signature of Reporting Person Date

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.