FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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|-------------------------|-----------|--|--|--|
| OMB Number: | 3235-0287 | | | |
| Estimated average burde | en | | | |
| hours per response: | 0.5 | | | |

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

Filed assessment to Continue 40(a) of the Consulting Fundament Act of 4004

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* <u>Lee John Tseng-Chung</u> | | | | 2. Issuer Name and Ticker or Trading Symbol MKS INSTRUMENTS INC [MKSI] | | | | | | | | Relationship of the ck all applications | able) r | g Perso | 10% Ow | ner | |
|--|--|--|---|---|---|--|---------|--|--------|---|-------------------------|---|--|--|--|--|--|
| (Last) 2 TECH | , | irst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 01/30/2013 | | | | | | | | X Officer (give title below) Other (specify below) Sr. VP, Controls & PFMC | | | | |
| (Street) | ER M | ÍΑ | 01810 | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Lir | dividual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | , | (Zip) | | r erson | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | |) | Execution Date, | | , Transaction Disposed Code (Instr. 5) | | ities Acquired (A) or d Of (D) (Instr. 3, 4 and | | Benefici Owned F | es ally Following | Form: | : Direct I r Indirect E str. 4) C | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | Co | de V | Amount | (A) o (D) | r Price | Reported Transact (Instr. 3 | ion(s) | | | nstr. 4) | |
| 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) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 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) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exerc | sable | Expiration Date | Title | Amount or Number of Share | | (Instr. 4) | | | |
| Restricted Stock Unit | (1) | 01/30/2013 | | J ⁽²⁾ | | | 119.199 | (3 | 9) | (3) | Common Stock | 119.19 | (1) | 8,687.3 | 394 | D | |

Explanation of Responses:

- 1. Each restricted stock unit represents the contingent right to receive one share of common stock of MKS Instruments, Inc.
- 2. This transaction reflects the forfeiture of RSUs due to performance criteria.
- 3. 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.

/s/Renee M. Donlan POA 02/01/2013

** 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.