FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden 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 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* BERTUCCI JOHN R | | | | | | 2. Issuer Name and Ticker or Trading Symbol MKS INSTRUMENTS INC [MKSI] | | | | | | | | | . Relationsh Check all ap X Dire | , | | rson(s) to Is | |
|---|---|--|--|---|--|---|---|-------|------------------|---|---------------------|---|---|--|---|---|---------------|---|--|
| (Last) (First) (Middle) 2 TECH DRIVE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/25/2014 | | | | | | | | Officer (give title below) | | | Other (specify below) | | | | |
| (Street) ANDOVER MA 01810 (City) (State) (Zip) | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | . Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tabl | e I - Noi | n-Deriv | ative/ | Se | curiti | es Ac | quired, | Dis | posed o | f, oı | r Ben | efici | ally Own | ed | | | |
| Dat | | | | Date | Date (Month/Day/Year) i | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code | Transaction Disp Code (Instr. 5) | | ecurities Acquired (A) posed Of (D) (Instr. 3, 4 | | | nd Secur Benet | icially d Following | Forr (D) (| wnership m: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Trans | ransaction(s) Instr. 3 and 4) | | | (11150.4) |
| Common Stock 06/25 | | | | | 5/2014 | 2014 | | | G | V | 60,000 | | D | \$ | 363,245.548 | | | D | |
| | | Та | | | | | | | | | sed of, onvertib | | | | y Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, | 4. Transa Code (8) | | n of Der Sec Acq (A) Disj of (I | of E | | 6. Date Exercisable an Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of 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 Exercisa | | Expiration Date | Title | or Nui of | nber | | | | | |

Explanation of Responses:

/s/Renee M. Donlan POA

06/26/2014

** 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.