## 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          |  |
| Instruction 1(b).                      |  |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPRC               | VAL       |
|-------------------------|-----------|
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|---|---|--|---|---------|---|--|---|------|---------------------------------------|---|--|----------|--|---|--|--|--|---------------------------------------|---|--|
| 1. Name and Address of Reporting Person*<br>VALENTE LOUIS P |   |  |   |         | 2. Issuer Name <b>and</b> Ticker or Trading Symbol<br><u>MKS INSTRUMENTS INC</u> [ MKSI ] |  |   |      |                                       |   |  |          | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable) |   |  |  |  |                                       |   |  |
|   | IL LOC  | <u>151</u>                                 |   |         |   | []   |   |      |                                       |   |  |          | Х  | Director  |  |  | 10% Ov   | wner                                  |   |  |
| (Last)<br>90 INDU   | (F<br>JSTRIAL V   | ,  | (Middle)  |         |   | 3. Date of Earliest Transaction (Month/Day/Year)<br>05/08/2006 |   |      |                                       |   |  |          |  |   | Officer (<br>below)  | (give title                                |  | Other (s<br>below)                    | specify   |  |
|   |   |  |   |         |   | 4. If Amendment, Date of Original Filed (Month/Day/Year)       |   |      |                                       |   |  |          |  | 6. Individual or Joint/Group Filing (Check Applicable |  |  |  |                                       |   |  |
| (Street)  |   |  |   |         |   |  | ,   |      | <b>3</b>                              |   |  | , ,      |  | ine)  |  |  | 5  | ( PI                                  |   |  |
| WILMINGTON MA 01887   |   |  |   |         |   |  |   |      |                                       |   |  |          |  | X Form filed by One Reporting Person                  |  |  |  |                                       |   |  |
| ,   |   |  |   |         | -   |  |   |      |                                       |   |  |          |  |   | Form fil<br>Person   | ed by Mor                                  | e than   | One Repo                              | rting   |  |
| (City)  | (S  | tate)                                      | (Zip)   |         |   |  |   |      |                                       |   |  |          |  |   |  |  |  |                                       |   |  |
|   |   | Tal  | ole I - Nor                                       | n-Deriv | vativ   | ve Se  | curitie   | s Ac | quired,                               | Dis   | posed o  | f, or Be | neficia  | ally (  | Owned  |  |  |                                       |   |  |
| 1. Title of Security (Instr. 3)<br>Date<br>(Month/D         |   |  |   | Date    |   |  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |      | Code (                                | Transaction Disposed Of (D) (Instr. 3, 4<br>Code (Instr. 5) |  |          |  | 4 and Securities<br>Beneficia<br>Owned Fo             |  | s Form<br>Illy (D) o<br>ollowing (I) (Ir   |  | : Direct<br>r Indirect<br>str. 4)     | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership |  |
|   |   |  |   |         |   |  |   | Code | v                                     | Amount  | (A) o<br>(D)   | r Pric   | e  | Reported<br>Transaction(s)<br>(Instr. 3 and 4)        |  |  |  | (Instr. 4)                            |   |  |
|   |   |  | Table II -  |         |   |  |   |      |                                       |   | osed of,<br>convertik  |          |  |   | wned   |  |  |                                       |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)         | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution I<br>if any<br>(Month/Day | Date,   | 4.<br>Transactior<br>Code (Instr<br>8)  |  |   |      | 6. Date Ex<br>Expiration<br>(Month/Da |   | 7. Title and Am<br>of Securities<br>Underlying<br>Derivative Sec<br>(Instr. 3 and 4) |          | D  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)   | 9. Numbe<br>derivative<br>Securities<br>Beneficia<br>Owned<br>Following<br>Reported<br>Transacti<br>(Instr. 4) | Owr<br>Forr<br>Ily Dire<br>or Ir<br>(I) (I | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |   |  |
|   |   |  |   |         | Code  | v  | (A)   | (D)  | Date<br>Exercisab                     |   | Expiration<br>Date   | Title    | Amou<br>or<br>Numb<br>of<br>Share  | er  |  |  |  |                                       |   |  |
| Director<br>Stock<br>Option<br>(Right to<br>Buy) 2006       | \$24.35   | 05/08/2006                                 |   |         | A   |  | 12,000  |      | 05/06/2007                            | 7(1)  | 05/08/2016   | Common   | 12,00  | 00  | \$0  | 12,00                                      | 0  | D                                     |   |  |

Explanation of Responses:

1. Option vests in full on the earlier of (i) the day before the subsequent year's annual meeting of shareholders or (ii) thirteen months from the date of grant.

| <u>By: Joseph M.Tocci / POA</u>  |
|----------------------------------|
| ** Signature of Reporting Person |

0<u>5/10/2006</u>

or Reporting Person

Date

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

 $\ast$  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.