Edgar Filing: ENTEGRIS INC - Form 4

ENTEGRIS 1	INC											
Form 4												
February 23,	2016											
FORM	14									OMB AF	PROVAL	
	UNITED	STATES				ND EX(D.C. 20		NGE C	COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: January 3 200 Estimated average burden hours per			
Form 5 obligation may contri <i>See</i> Instru 1(b).	Filed put ns Section 170	(a) of the I		ility H	lold	ing Con	npany	Act of	e Act of 1934, 71935 or Sectior 40	response	0.5	
(Print or Type R	Responses)											
Shaner William James Symbol				er Name and Ticker or Trading GRIS INC [ENTG]					5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3. Date of				e of Earliest Transaction					(Check all applicable)			
(Mor				(Month/Day/Year) 02/19/2016					Director 10% Owner X Officer (give title Other (specify below) below) Sr. V.P. Global Ops.			
				nendment, Date Original Ionth/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
CARLISLE,	, MA 01741								Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - No	n-Do	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Executior any		Code (Instr.	8)	4. Securi n(A) or Di (Instr. 3, Amount	sposed 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	02/19/2016			F		3,834	D	\$ 12.11	46,137	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Shaner William James 82 JOHNSON ROAD CARLISLE, MA 01741			Sr. V.P. Glot	pal Ops.				
Signatures								
/s/ Peter W. Walcott, Attorney- Shaner	02/23/2016							
<u>**</u> Signature of Report	Date							

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.