## Edgar Filing: ENTEGRIS INC - Form 4

ENTEGRIS INC

ENTEGRIS INC Form 4	2								
February 23, 20	16								
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB AF OMB Number:	APPROVAL 3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Check this box STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940						•			
(Print or Type Resp	onses)								
GRAVES GREGORY B Symbol			r Name <b>and</b> Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	iddle) 3. Date o	f Earliest Tr	ansaction			(Check	k all applicable	)
4613 DREXEL AVE. S. (Month/D 02/19/20			2016 <u>—X</u> Officer (give below)			e title 10% Owner below) cc. V.P. & CFO			
	(Street)	reet) 4. If Amendment, Date Original Filed(Month/Day/Year)				<ol> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ol>			
EDINA, MN 55	5424							Iore than One Re	
(City)	(State) (2	Zip) Tab	le I - Non-D	) erivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned
	Transaction Date Ionth/Day/Year)		3. Transactic Code (Instr. 8)	4. Securitor(A) or Di (Instr. 3,	ties Ac sposed 4 and 3 (A) or	cquired 1 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)	7. Nature of
Common 02 Stock 02	2/19/2016		F	7,120	D	\$ 12.11	66,610	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				
GRAVES GREGORY B 4613 DREXEL AVE. S. EDINA, MN 55424			Exec. V.P.	& CFO				
Signatures								
/s/ Peter W. Walcott, Attorney- Graves	8.	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.