### Edgar Filing: Tison Stuart - Form 4

Tison Stuart Form 4											
November 0	1, 2017										
FORM	14		~					OMB APPROVAL			
	UNITED STAT	ES SECURITIE Washingt				NGE C	OMMISSION	OMB Number:	3235-0287		
Check th if no long subject to	ger STATEMENT	OF CHANGES	IN I	BENEFI	CIAI	L OWI	NERSHIP OF	Expires:	January 31, 2005		
Section 16. SECURITIES							Estimated average burden hours per				
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction (C) (C) (C) (C) (C) (C) (C) (C) (C) (C)									0.5		
(Print or Type Responses)											
1. Name and A Tison Stuar		Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
		-	Symbol ENTEGRIS INC [ENTG]					(Check all applicable)			
(Last)	(First) (Middle)	3. Date of Earlies		insaction							
C/O ENTEC CONCORD	GRIS, INC., 129 ROAD	(Month/Day/Yea 10/30/2017	(Month/Day/Year) 10/30/2017					Director 10% Owner X Officer (give title Other (specify below) below) SVP & GM, SCEM Div.			
(Street) 4. If Amendm				-			6. Individual or Joint/Group Filing(Check Applicable Line)				
Filed(Month BILLERICA, MA 01821							_X_ Form filed by C	X_Form filed by One Reporting Person Form filed by More than One Reporting			
(City)	(State) (Zip)	Table I - No	on-De	erivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Do (Month/Day/Year) Execut any (Mont	ion Date, if Transaction(A) or Disposed of (D) Securities Code (Instr. 3, 4 and 5) Beneficial //Day/Year) (Instr. 8) Owned Following Reported				Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial			
_		Code	V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	10/30/2017	М		16,310	А	\$ 8.76	91,881	D			
Common Stock	10/30/2017	F		7,985	D	\$ 32.1	83,896	D			
Common Stock	10/30/2017	М		10,000	А	\$ 9.27	93,896	D			
Common Stock	10/30/2017	F		5,139	D	\$ 32.1	88,757	D			
Common Stock	10/30/2017	G	V	3,000	D	\$0	85,757	D			

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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)

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. Transactic Code (Instr. 8)	5. Number of orDerivative 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 8.76	10/30/2017		М		16,310	<u>(1)</u>	02/19/2018	Common Stock	16,310
Employee Stock Option (Right to Buy)	\$ 9.27	10/30/2017		М		10,000	<u>(1)</u>	02/19/2019	Common Stock	10,000

## **Reporting Owners**

Reporting Owner Name / Address			Relationships			
I O	Director	10% Owner	Officer	Other		
Tison Stuart C/O ENTEGRIS, INC. 129 CONCORD ROAD BILLERICA, MA 01821			SVP & GM, SCEM Div.			
Signatures						
/s/ Sue Lee, Attorney-In-Fact for Stuart Tison		11/01/2017				
**Signature of Reporting Persor	ı		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).
- (1) This option is fully vested.
- (2) This option was granted pursuant to the Entegris, Inc. 2010 Equity Incentive Plan, as amended, in consideration of services as an employee.

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.