FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPRO	VAL				
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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(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Edlund Todd James</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol ENTEGRIS INC [ ENTG ]									all applica Director	able)	Perso	on(s) to Issu	wner
(Last) (First) (Middle) 4956 EAST 255TH STREET						3. Date of Earliest Transaction (Month/Day/Year) 06/09/2014								X	below) `	(give title .P.GM Critical		Other (s below) Materials	ресіту
(Street) ELKO MN 55020 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y					ction	ion 2A. Deemed Execution Date,		ed n Date,	3.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amou Securitie Beneficie Owned F		es For ally (D) Following (I) (		: Direct I r Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership
										v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)
Common Stock 06/09/201						14		S	П	42,640(1)	D	\$5	5.4	94,	1,485		D		
Common Stock 06/09/20					/2014	14		M	П	42,640(1)	A	\$12.0	803 <sup>(2)</sup>	137	137,125		D		
			Table I								posed of, , convertib				vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year)		on Date,	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		D S	. Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amo or Num of Shai	nber		(Instr. 4)	on(s)		
Employee Stock Option (Right to	\$5.4	06/09/2014			M			42,640 <sup>(1)</sup>		(3)	02/19/2017	Commo Stock		640	(4)	0		D	

## **Explanation of Responses:**

- $1.\ These shares were exercised and sold pursuant to a Rule 10b5-1\ Trading\ Plan established by the Reporting\ Person on\ May\ 7,\ 2014.$
- 2. The price reported in column 4 is a weighted average price reported in reliance on a letter from the Office of Chief Counsel, Securities and Exchange Commission's Division of Corporate Finance to the Society of Corporate Secretaries & Corporate Governance Professionals dated June 25, 2008. These shares were sold in multiple transactions at prices ranging from \$11.99 to \$12.15, inclusive. The reporting person undertakes to provide Entegris, Inc., any shareholder of Entegris, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.
- 3. This option is fully vested.
- 4. This option was granted pursuant to an employee stock option plan that provides for the grant of options in consideration of services as an employee.

## Remarks:

/s/ Peter W. Walcott. Attorney-06/10/2014 In-Fact for Todd J. Edlund

\*\* 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.