FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

| Washington, I | D.C. | 20549 |
|---------------|------|-------|
|---------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |  |  |  |  |  |  |  |
|--------------------------|--|--|--|--|--|--|--|
| OMB Number: 3235-0287    |  |  |  |  |  |  |  |
| Estimated average burden |  |  |  |  |  |  |  |
| hours per response: 0.   |  |  |  |  |  |  |  |

|   | tion 1(b).   | iuc. occ |                                 | Filed                            |  |  |        |   |                                       |            | es Exchang<br>npany Act o |   | f 1934  |  |  | nours   | per re | esponse:                   | 0.5 |
|---|--|----------|---------------------------------|----------------------------------|--|--|--------|---|---------------------------------------|------------|---------------------------|---|---|--|--|---|--------|----------------------------|-----|
| Name and Address of Reporting Person*     SALEKI-GERHARDT AZITA |  |          |                                 |                                  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol ENTEGRIS INC [ ENTG ] |  |        |   |                                       |            |                           |   |   |  | k all app  | licable)  | ng Pe  | erson(s) to Is             |     |
|   | O ENTEGRIS, INC.   |          |                                 |                                  | 3. Date of Earliest Transaction (Month/Day/Year) 04/29/2020              |  |        |   |                                       |            |                           |   |   |  | Office<br>below  | cer (give title<br>w)   |        | Other (specify below)      |     |
| 129 CONCORD ROAD  |  |          |                                 |                                  | 4. If Amendment, Date of Original Filed (Month/Day/Year)                 |  |        |   |                                       |            |                           |   | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |  |   |        |                            |     |
| (Street) BILLER (City)  |  |          | 1821<br>                        |                                  |  |  |        |   |                                       |            |                           |   |   | X  |  | filed by Mo   |        | porting Pers<br>an One Rep |     |
| (City)  | (51  |          |                                 | Dorivo                           | tivo (   | 200111   | rition | Λ ο σ   | uirad                                 | Die        | noood of                  | - Or F  | lonofi  | oiall  |  |   |        |                            |     |
| Date  |  |          | 2. Transac<br>Date<br>(Month/Da | ction 2A. Deemed Execution Date, |  | 3.<br>Transa<br>Code (<br>8)   | ction  | 4. Securitie  | es Acquired (A) or (D) (Instr. 3, 4 a |            | or<br>1 and               | 5. Amount of<br>Securities<br>Beneficially<br>Owned Followi<br>Reported   |   | Forr<br>(D)  | m: Direct  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |        |                            |     |
| Common Stock 04/2   |  |          |                                 |                                  | /2020  |  |        |   | A                                     |            | 2,567(1)                  | A \$0   |   | <b>0</b> <sup>(2)</sup>  | 14,123   |   |        | D                          |     |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |          |                                 |                                  |  |  |        |   |                                       |            |                           |   |   |  |  |   |        |                            |     |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)             | ive Conversion or Exercise (Month/Day/Year) y) or Exercise Price of Derivative Security  Execution Date, if any (Month/Day/Year)             |          | 4.<br>Transa<br>Code (<br>8)    |                                  |  | 6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date |        | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)  Amou or Numb of Share |                                       | int<br>per |                           | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | у   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |        |                            |     |

## **Explanation of Responses:**

- 1. These Restricted Stock Units vest in full on the earlier of (1) the anniversary date of the grant, or (2) the date of the Company's 2021 Annual Meeting of Stockholders.
- 2. These shares were awarded on April 29, 2020 as Restricted Stock Units, payable solely in Common Stock, pursuant to the Entegris, Inc. 2020 Stock Plan, which provides for the award of Restricted Stock Units to independent directors in consideration for services as such.

## Remarks:

/s/ Joseph Colella, Attorney-In-Fact for Azita Saleki-

**Gerhardt** 

\*\* Signature of Reporting Person Date

05/01/2020

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.