

AMETEK INC/  
Form 3  
May 16, 2016

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF 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 Responses)

1. Name and Address of Reporting Person *			2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
MONTGOMERY THOMAS			(Month/Day/Year)	AMETEK INC/ [AME]	
M			05/15/2016		
(Last)	(First)	(Middle)		4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
1100 CASSATT ROAD				(Check all applicable)	
(Street)				<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
BERWYN, PA 19312				<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Form filed by One Reporting Person
(City)	(State)	(Zip)		SR. VP. - COMPROLLER	<input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
401k Plan	3,248	I	401k Plan
Common Stock	21,621	D	^
Common Stock/serp	793	D	^

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

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial Ownership
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	Date Exercisable	Expiration Date	Derivative Security (Instr. 4) Title	Amount or Number of Shares	or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	(Instr. 5)
Stock Option	Â (1)	04/30/2019	Common Stock	6,864	\$ 34.0467	D	Â
Stock Option	Â (2)	05/07/2020	Common Stock	6,736	\$ 41.74	D	Â
Stock Option	Â (3)	05/07/2021	Common Stock	5,602	\$ 53.13	D	Â
Stock Option	Â (4)	05/05/2022	Common Stock	7,036	\$ 52.27	D	Â
Stock Option	Â (5)	05/03/2023	Common Stock	10,130	\$ 46.96	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
MONTGOMERY THOMAS M 1100 CASSATT ROAD BERWYN, PA 19312	Â	Â	Â SR. VP. - COMPTROLLER	Â

## Signatures

/s/Thomas M. 05/16/2016  
Montgomery

\*\*Signature of Reporting Person Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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) The stock options will become exercisable in four equal annual installments beginning on May 1, 2013.
- (2) The stock options will become exercisable in four equal annual installments beginning on May 8, 2014.
- (3) The stock options will become exercisable in four equal annual installments beginning on May 8, 2015.
- (4) The stock options will become exercisable in four equal annual installments beginning on May 6, 2016.
- (5) The stock options will become exercisable in four equal annual installments beginning on May 4, 2017.

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.