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,	D.C. 20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per response:	0.5									

	tion 1(b).	nac. occ		Filed	d pursua or Se	ant to S ection (Section 30(h) c	n 16(a) of the I	of the S	Securi ent Co	ties Exchang ompany Act o	e Act of f 1940	f 1934		nours	s per respo	unse:	0.5	
1. Name and Address of Reporting Person* <u>CIAMPITTI TONY J</u>					2. Issuer Name and Ticker or Trading Symbol AMETEK INC/ [AME]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 1100 CASSATT ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/10/2021									X Officer (give title Other (specify below) PRES ELECTRONIC INSTRUMENTS				
(Street) BERWYN PA 19312					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St		Zip)																
1. Title of Security (Instr. 3) 2. Trai			2. Transact	ion 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8) 3. 4. Securities Acquing Disposed Of (D) (Instr. 5)			s Acquii	red (A) or	5. A Se Be Ow	5. Amount of Securities Beneficially Owned Following Reported		Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price	Tra	ansaction(s) str. 3 and 4)			(111301. 4)	
Common	mmon Stock 05/10/2				021		F ⁽¹⁾		880	D	\$137			Ι)				
Common	Stock/ Ser	p							_				_	6,794 D					
401k Plar	n													2,693 I 401 Plat					
		Tal	ble II								osed of, convertib				ned		,		
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. Transa Code 8)		of Deriv Secu Acqu (A) o Dispo	or osed) r. 3, 4	6. Date Expira (Month	tion D		7. Title Amou Securi Under Deriva Securi 3 and	nt of ities lying litive ity (Instr. 4) Amount or	8. Price Derivati Security (Instr. 5	ive derivative Securities	Ov Fo Dii or (I)	vnership rm: rect (D) Indirect (Instr. 4)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)	
			Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Number of Shares								

Explanation of Responses:

1. Represents withholding of shares to pay withholding taxes.

/s/ Lynn Carino, attorney-infact for Mr. Ciampitti

05/11/2021

** 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.