FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	OVAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

					_		. ,				' '									
1. Name and Address of Reporting Person* MOLINELLI JOHN J							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 Officer (give title) Other (specify)				
(Last) (First) (Middle) 37 NORTH VALLEY ROAD BUILDING 4						3. Date of Earliest Transaction (Month/Day/Year) 04/27/2005									X Officer (give title below) Other (specify below) EXECUTIVE VP & CFO					
(Street) PAOLI	treet) AOLI PA 19301-0801					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)													Person							
		Tak	ole I - Noi	n-Deri	ivativ	e Se	ecurities	s Ac	quired,	Dis	posed o	f, or Be	nefici	ially	Owned					
Date					nsaction th/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		, Transaction Dispose Code (Instr. 5)			ties Acquire I Of (D) (Ins		and Securitie Benefici		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) or (D)	Pric	e	Transact (Instr. 3	tion(s)			(
Common Stock 04/27						'/2005			A ⁽¹⁾		6,560) A	\$3	7.58 161		1,140		D		
Common Stock/SERP															26,9	50.54		D		
401K PLAN														3	33	I		401K PLAN		
			Table II -						uired, D s, option						wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Execu (Month/Day/Year) if any	if any	ution Date,		action (Instr.	n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Blly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amou or Numb of Share	er						
Stock Option	\$9.9688								04/13/200)1 (04/12/2007	Common Stock	65,00	00		65,000	,000 D			
Stock Option	\$10								04/15/200	00 0	04/14/2006	Common Stock	60,00	00		60,000	0	D		
Stock Option	\$13.1425								05/22/200)2 (05/21/2008	Common Stock	65,00	00		65,000		D		
Stock Option	\$18.0625								05/20/200)4 (05/19/2010	Common Stock	60,00	00		60,000	0	D		
Stock Option	\$18.82						_		05/22/200)3 (05/21/2009	Common Stock	55,00	00		55,000	0	D		
Stock Option	\$26.175						_		05/18/200)5 (05/17/2011	Common Stock	26,2	50		26,250	0	D		
Stock Option	\$30.405						_		09/22/200)5 (09/21/2011	Common Stock	24,6	80		24,680	0	D	<u> </u>	
Stock Option	\$37.93	04/27/2005			A		18,580		04/27/200	06 0	04/26/2012	Common Stock	18,5	80	\$37.93	18,580	0	D		

Explanation of Responses:

 $1.\ Constitutes\ restricted\ stock\ is sued\ under\ the\ 1999\ Stock\ Incentive\ Plan\ of\ AMETEK,\ Inc.$

JOHN J MOLINELLI

04/28/2005

** 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.