FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT	OF CHAN	GES IN F	RENEEICIAI	OWNERSHIP
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OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* ZAPICO DAVID A					2. Issuer Name and Ticker or Trading Symbol AMETEK INC/ [AME]										Relationship heck all appli Direct	cable) or	g Pers	10% O	wner	
(Last) (First) (Middle) 1100 CASSATT ROAD				3. Date of Earliest Transaction (Month/Day/Year) 05/02/2016										X Officer (give title below) Other (specify below) EXECUTIVE VP & COO						
	treet) BERWYN PA 19312-1177			4. If	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 Person					
(City)	(S		(Zip)														_			
1. Title of Security (Instr. 3) 2. Tran			2. Trans	action	ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		e, 3	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			(A) or	5. Amou Securiti Benefic Owned	ınt of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									[Code	v	Amount		A) or D)	Price	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)
Common Stock				05/02	02/2016					F ⁽¹⁾		2,68	1	D	\$48.	46 11	115,989		D	
Common Stock/serp															45	,602	D			
		Т										sed of onverti				y Owned				
1. Title of Derivative Security (Instr. 3)	Conversion Date Execution or Exercise (Month/Day/Year) if an		3A. Deeme Execution if any (Month/Da	ed Date,	4. Transactior Code (Instr. 8)		5. Number 6.		6. Da	Date Exercisal xpiration Date //onth/Day/Year		ole and			Amount	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Ownership Form:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e rcisable		piration ite	Title	0 0	mount r lumber f shares					
Stock Option	\$19.5867									(2)	04	/28/2017	Comr		80,000		30,000		D	
Stock Option	\$29.8267									(3)	05	/02/2018	Comr		5,965		25,965		D	
Stock Option	\$34.0467									(4)	04	/30/2019	Comr		31,200		31,200		D	
Stock Option	\$41.74									(5)	05	/07/2020	Comr		8,760		58,760		D	
Stock Option	\$53.13									(6)	05	/07/2021	Comr		4,740		44,740		D	
Stock Option	\$52.27									(7)	05	/05/2022	Comr		8,040		58,040		D	

Explanation of Responses:

- 1. Represents withholding of shares to pay withholding taxes incurred in connection with cliff vesting of restricted stock issued on May 1, 2012.
- 2. The stock options will become exercisable in four equal annual installments beginning on April 29, 2011.
- $3. \ The \ stock \ options \ will \ become \ exercisable \ in \ four \ equal \ installments \ beginning \ on \ May \ 3, \ 2012.$
- $4. \ The stock options will become exercisable in four equal installments beginning on May 1, 2013.$
- 5. The stock options will become exercisable in four equal annual installments beginning on May 8, 2014.
- 6. The stock options will become exercisable in four equal annual installments beginning on May 8, 2015.
- 7. The stock options will become exercisable in four equal annual installments beginning on May 6, 2016.

/s/Amy M. Brown, attorney-infact for Mr. Zapico 05/04/2016

** 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.