FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL
I	OMB Number:	3235-0287
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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* MANDOS ROBERT R						2. Issuer Name and Ticker or Trading Symbol AMETEK INC/ [AME]									ck all applic	•		ner		
(Last) (First) (Middle) 1100 CASSATT ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/08/2014										X Ollicer (give title Other (specify below) EXECUTIVE VP & CFO				
P.O. BO	X 1764				4.1	lf Am	endment, I	Date	of Original I	iled	(Month/Da	ay/Year)		6. In	dividual or .	Joint/Group	Filing	(Check App	olicable	
(Street) BERWYN PA 19312-117				77											Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(City) (State) (Zip)				Person															
		Tab	le I - Nor	n-Deriv	/ativ	e Se	curities	s Ac	quired,	Disp	oosed c	of, or I	Bene	ficially	/ Owned					
				2. Transaction Date (Month/Day/Year			2A. Deemo Execution if any (Month/Da	Code (I	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct r Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership		
											Amount	(A (D	or	Price	Transaci (Instr. 3	tion(s)		[(Instr. 4)	
Common Stock					05/08/2014						967		D	\$53.13	100),362		D		
Common Stock 05					5/08/2014				A ⁽²⁾		9,830)	A	\$53.13	110),192		D		
401k Plan																1			401k Plan	
Common Stock/serp														19	,221		D			
		-	Table II -												Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, Transaction of		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title a of Secul Underly Derivati					Title and Amount Securities derlying rivative Security str. 3 and 4)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exercisabl		expiration Pate	Title	OI N Of	ımber						
Stock Option	\$53.13	05/08/2014			A		33,490		(3)	0	5/07/2021	Comm		3,490	\$0	33,490	0	D		
Stock Option	\$19.5867								(4)	0	4/28/2017	Comm		9,079		29,079	9	D		
Stock Option	\$29.8267								(5)	0	5/02/2018	Comm Stock		5,150		15,150	0	D		
Stock Option	\$34.0467								(6)	0	4/30/2019	Comm Stock		3,704		28,704	4	D		
Stock Option	\$41.74								(7)	0	5/07/2020	Comm		7,200		47,200	0	D		

Explanation of Responses:

- 1. Represents withholding of shares to pay withholding taxes incurred in connection with 1st year vesting (25%) of restricted stock issued on May 8, 2013.
- 2. Constitutes restricted stock issued under the AMETEK, Inc. 2007 Omnibus Incentive Compensation Plan.
- 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 April 29, 2011.
- 5. The stock options will become exercisable in four equal installments beginning on May 3, 2012.
- 6. The stock options will become exercisable in four equal installments beginning on May 1, 2013.
- 7. The stock options will become exercisable in four equal annual installments beginning on May 8, 2014.

/s/ Robert R. Mandos 05/09/2014

** 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.