FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TATEMENT	<b>OF CHANGES</b>	<b>IN BENEFICIAL</b>	<b>OWNERSHIP</b>

OMB APPROVAL										
OMB Number:	3235-0287									
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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*  EGINTON WILLIAM D						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) 1100 CASSATT ROAD P.O. BOX 1764					3. Date of Earliest Transaction (Month/Day/Year) 02/06/2013											X Officer (give title Offier (specify below)  SENIOR VP-CORP. DEVELOPMENT						
(Street)		A	19312-1177				4. If Amendment, Date of Original Filed (Month/Day/Year)								Lin	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	tate)	(Zip)																			
			le I - No			_			_		Dis	_				lly			_			
1. Title of Security (Instr. 3)  2. Transplate (Month/I				ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		•,	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				15)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code V		Amount	(A (E	() or ()				Price				
Common Stock/serp 02/0					5/2013	2013				J <sup>(1)</sup>		661		A	\$37.5	58 17,		7,360		D		
401k Plan															4,		,851			401(k) Plan		
Common Stock															57,		,104		D			
Common Stock/deferred Compensation															8,075			D				
		Т	able II -									osed of				<i>O</i>	wned					
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date, Transact Code (Ins					6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		s Security	t 8. Price of Derivative Security		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Dat Exe	e ercisable	E:	xpiration ate	Title		Amount or Number of Shares							
Stock Option	\$14.5378									(2)	04	4/22/2016	Comm Stoc		37,170			37,170	)	D		
Stock Option	\$19.5867									(3)	04	4/28/2017	Comm		26,185			26,185	5	D		
Stock Option	\$29.8267									(4)	05	5/02/2018	Comm		14,598			14,598	3	D		
Stock Option	\$34.0467									(5)	04	4/30/2019	Comm		16,368			16,368	3	D		

## **Explanation of Responses:**

- 1. Allocated pursuant to the AMETEK, Inc. Supplemental Executive Retirement Plan under which shares are automatically distributed on a one-for-one basis upon the participant's retirement.
- 2. The stock options will become exercisable in four equal annual installments beginning on April 23, 2010.
- 3. The stock options will become exercisable in four equal annual installments beginning on April 29, 2011.
- 4. The stock options will become exercisable in four equal installments beginning on May 3, 2012.
- 5. The stock options will become exercisable in four equal installments beginning on May 1, 2013.

/s/ William D. Eginton 02/06/2013

\*\* 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.