### Edgar Filing: MOLINELLI JOHN J - Form 4

MOUNELLI IOUNU

MOLINELLI	JOHN J						
Form 4							
January 03, 20	06						
FORM	4				OMB AP	PROVAL	
	UNITED STATE	S SECURITIES AND EX Washington, D.C. 20		MMISSION	OMB Number:	3235-0287 January 31,	
Check this if no longer		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					
subject to Section 16. Form 4 or	SIAIEMENIC						
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations Mage Comparison (Comparison (Compa							
(Print or Type Re	sponses)						
1. Name and Add MOLINELLI	dress of Reporting Person <u>*</u> JOHN J	2. Issuer Name <b>and</b> Ticker o Symbol AMETEK INC/ [AME]		Relationship of F suer			
(Last)	(First) (Middle)	3. Date of Earliest Transaction		(Check	all applicable)	1	
37 NORTH VALLEY ROAD, BUILDING 4		(Month/Day/Year) 12/31/2005	Director 10% Owner X Officer (give title Other (specify below) EXECUTIVE VP & CFO				
	(Street)	4. If Amendment, Date Origin Filed(Month/Day/Year)	Ap	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
PAOLI, PA 1	9301-0801		Pe	Form filed by Mo	ore than One Rep	oorting	
(City)	(State) (Zip)	Table I - Non-Derivative	Securities Acquir	ed, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	any	tion Date, if Transaction Dis	3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
		Code V Amou	(A) or unt (D) Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock				156,140	D		
Common Stock/SERP	12/31/2005	J <u>(1)</u> 459.8	7 A <sup>\$</sup> 43.323	27,410.41	D		
401K PLAN				334	Ι	401K PLAN	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control

#### Edgar Filing: MOLINELLI JOHN J - Form 4

#### number.

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secu (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 9.9688					04/13/2001	04/12/2007	Common Stock	65,000	
Stock Option	\$ 13.1425					05/22/2002	05/21/2008	Common Stock	65,000	
Stock Option	\$ 18.0625					05/20/2004	05/19/2010	Common Stock	60,000	
Stock Option	\$ 18.82					05/22/2003	05/21/2009	Common Stock	55,000	
Stock Option	\$ 26.175					05/18/2005	05/17/2011	Common Stock	26,250	
Stock Option	\$ 30.405					09/22/2005	09/21/2011	Common Stock	24,680	
Stock Option	\$ 37.93					04/27/2006	04/26/2012	Common Stock	18,580	

## **Reporting Owners**

Reporting Owner Name / Addr	ess		Relationships	
	Director	10% Owner	Officer	Other
MOLINELLI JOHN J 37 NORTH VALLEY ROA BUILDING 4 PAOLI, PA 19301-0801	D		EXECUTIVE VP & CFO	
Signatures				
JOHN J MOLINELLI	12/21/2005			

\*\*Signature of
Reporting Person

Date

## **Explanation of Responses:**

- \* 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).
- (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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.