Edgar Filing: Joseph Jason - Form 4

Joseph Jason Form 4 March 31, 20	11										
FORM	Л	D STATES	SECUR	TIFS A	ND FXC	HAN	JGE (OMMISSION	r	PPROVAL	
Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b).	s box er STAT 5. Filed p s Section 1	STATED STATES SECURITIES AND EXCHANCE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 20(b) of the Investment Company Act of 1940								OMB 3235-0287 Number: January 31 Expires: 2005 Estimated average burden hours per response 0.5	
(Print or Type Ro	esponses)										
1. Name and Address of Reporting Person <u>*</u> Joseph Jason			2. Issuer Name and Ticker or Trading Symbol BROOKS AUTOMATION INC [BRKS]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
				Earliest Tra ay/Year))11	ansaction			Director 10% Owner X Officer (give title Other (specify below) below) VP, General Counsel, Secretary			
(Street) 4. If Amendr Filed(Month/I				dment, Date Original h/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 			
CHELMSFO	ORD, MA 018	24						Person	lore than One Ke	porung	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Execution any	on Date, if	3. Transactic Code (Instr. 8) Code V	on(A) or Dis (D)	sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	03/29/2011			A		A	\$ 0 (1)	15,000	D		

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 number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	⁷ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
Joseph Jason C/O BROOKS AUTOM 15 ELIZABETH DRIVE CHELMSFORD, MA 0			VP, General Counsel, Secretary					
Signatures								
/s/ Jason Joseph	03/31/2011							
**Signature of	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).

Grant of restricted shares to the Reporting Person under the company's Long Term Incentive Plan. No amount was paid upon grant of the shares. Half of the shares are subject to time-based vesting and half of the shares are subject to performance-based vesting. The

(1) shares that of the shares are subject to this-based vesting and har of the shares are subject to performance-based vesting. The time-based shares vest 33-1/3% per year, beginning on the first anniversary of the grant date. The performance-based shares vest upon achieving metrics at fiscal year end 2013.

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.

Reporting Person