FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* DICKERSON GARY E				API	2. Issuer Name and Ticker or Trading Symbol APPLIED MATERIALS INC /DE [AMAT]									heck a	ll applic Director	cable) or (give title	g Person(s) to Is 10% C Other below	Owner (specify	
(Last) (First) (Middle) C/O APPLIED MATERIALS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 06/19/2013											Pres	ident		
P.O. BOX 58039, 3050 BOWERS AV, M/S 1268				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SANTA CLARA CA 95054														X	•				
(City)	(St	tate) (2	Zip)																
		Tabl	e I - No	n-Deriva	ative \$	Secu	ıritie	s Acc	quired	, Dis	posed o	f, o	r Bene	eficia	lly O	wned	I		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Da		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4				and 5) Secu Bene Own		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	Ti	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock 06/19/2				2013		F		114,796	5 ⁽¹⁾ D \$1		\$15.	69	9 1,335,855(2)		D				
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)	rative Conversion Date Execution Date, if any			ansaction of Deri Sect Acqi (A) c Disp of (D		ative rities ired sed	6. Date I Expirati (Month/I	on Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount	8. Price Derivat Securit (Instr. !	tive de Sc	. Number of lerivative lecurities Seneficially Iwned ollowing Reported ransaction(sinstr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. Represents number of shares that were automatically withheld upon vesting of restricted stock to cover tax withholding obligations in a transaction exempt under Rule 16b-3.
- 2. Number of shares includes: (a) 900,000 performance shares previously reported that in the future will be converted on a one-for-one basis into shares of Applied common stock upon vesting, which vesting will be scheduled to occur as follows: (i) provided specified performance goals are achieved, 500,000 shares will be scheduled to vest in installments during each July of 2014 through 2016, which number of shares is the target amount, and the actual number of shares that may vest ranges from 0% to 150% of the target amount, depending on achievement of specified performance goals; and (ii) provided specified performance goals are achieved, 400,000 shares will be scheduled to vest in installments during each December of 2013 through 2016, which number of shares is the target amount, and the actual number of shares that may vest ranges from 0% to 150% of the target amount, depending on achievement of specified performance goals; and (b) 330,000 shares of restricted stock previously reported that are scheduled to vest in installments during each June of 2014 and 2015 (all vesting is subject to continued employment through each applicable vest date).

/s/ Yvonne Leyba, Attorney-in-Fact 06/21/2013

** 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.