FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB Number: Estimated average burden hours per response: 0.5

OMB APPROVAL

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* ADDIEGO GINETTO (Last) (First) (Middle) C/O APPLIED MATERIALS, INC. 3050 BOWERS AVE, M/S 1268 P.O. BOX 58039 (Street) SANTA CLARA CA 95054 (City) (State) (Zip)					3. D 12/	2. Issuer Name and Ticker or Trading Symbol APPLIED MATERIALS INC /DE [AMAT] 3. Date of Earliest Transaction (Month/Day/Year) 12/19/2015 4. If Amendment, Date of Original Filed (Month/Day/Year)								[] (C	5. Relationship of Reporting Person(s) to Issuer Check all applicable) Director 10% Owner X Officer (give title Other (specify below) SVP, Engineering 5. Individual or Joint/Group Filing (Check Applicable line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D			action	Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			(A) or 3, 4 an	5. Am Secur Bene Owne Repo	ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock 12			12/19	0/2015	2015				v	9,418 ⁽	-	A) or D)	Price \$18	(Instr	3 and 4)	D		
Common Stock												22	.1.918 ⁽³⁾	I	By 401(k) Plan			
		Та	ıble II - I								sed of, onvertib				Owned	l	,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transa Code (8)	Instr.		rative rities ired r osed) : 3, 4	6. Date Expiration (Month/D	n Date	•	Amo Secu Unde Deriv	Amo	ount nber	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)

Explanation of Responses:

- 1. Represents number of shares that were automatically withheld upon vesting of performance shares to cover tax withholding obligations in a transaction exempt under Rule 16b-3.
- 2. Number of shares includes 146,691 performance shares previously reported that in the future will be converted on a one-for-one basis into shares of Applied Materials, Inc. common stock upon vesting, which vesting is scheduled to occur as follows: (a) 54,147 shares are scheduled to vest in installments in December of each of 2016 through 2018, with up to an additional 36,098 shares that may vest, depending on achievement of specified performance goals, and (b) 92,544 shares that will be scheduled to vest in installments in December of each of 2016 through 2019, 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 (all vesting is subject to continued employment through each applicable vest date).
- 3. Increased number of shares reflects dividend reinvestment under 401(k) Plan that is exempt under Rule 16b-3.

/s/ Harpreet S. Bal, Attorneyin-Fact

12/22/2015

** 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.