FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

snington, D.C. 20549

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| OMB Number: | 3235-028 |
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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).

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* FLYNN MATTHEW P | | | | | | 2. Issuer Name and Ticker or Trading Symbol AXCELIS TECHNOLOGIES INC [ACLS] | | | | | | | | eck all | utionship of Reporting Perso all applicable) Director | | | on(s) to Issuer | | |
|--|---|--|---|-------------|---|---|---|---|---|-------------------|-------------------------|---|--|---|---|---|---|--|--|--|
| (Last) (First) (Middle) C/O AXCELIS TECHNOLOGIES, INC. | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/09/2010 | | | | | | | v C | Officer (give title below) EVP, Custome | | | Other (s below) | · I | |
| | ERRY HILL | · · | | | L | | | | | | | | | | | | | | | |
| | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) BEVERI | LY M | ÍΑ | | | | | | | | | | | X Form filed by One Reporting Person | | | | | | | |
| - | | | | | - | | | | | | | | | Form filed by More than One Reporting Person | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | | |
| | | Tal | ole I - No | n-Deri | vativ | e Se | curit | ties Ac | quired | , Dis | sposed o | f, or Bei | neficial | ly Ov | ned | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date (Month/ | | | | | ar) l | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr.) 8) | | | d (A) or r. 3, 4 and | 4 and 5) Securit Benefic Owned | | s 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 | Tra | portec ansact str. 3 a | tion(s) | | | Instr. 4) | |
| Common Stock 12/0 | | | | | 9/201 | 0 | | | | | 15,000 |) A | \$1.1 | 6 | 122 | 2,135 | | D | | |
| Common Stock 12/09/ | | | | | 9/201 | 2010 | | | S | | 3,400 | D | \$3.11 | 01 | 1 118,7 | | | D | | |
| Common Stock 12/09/ | | | | | 9/201 | /2010 | | | S | | 11,600 | D | \$3.1 | 107,1 | | 135(1) | | D | | |
| | | | Table II - | | | | | | | | osed of, convertib | | | Own | ed | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | ed Date, | 4. Transaction Code (Instr. 8) | | 5. Number of | | 6. Date Exercisa Expiration Date (Month/Day/Yea | | sable and e | 7. Title an of Securit Underlyin Derivative (Instr. 3 a | d Amount ies g Security | Deriv | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | i F | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | ble | Expiration Date | Title | Amount or Number of Shares | | | | | | | |
| Axcelis non- qualified stock option (right to | \$1.16 | 12/09/2010 | | | М | | | 15,000 | 11/16/20 | 10 ⁽²⁾ | 11/15/2019 | Common Stock | 15,000 | \$ | 60 | 135,00 | 00 | D | | |

Explanation of Responses:

1. Of the shares held as of December 9, 2010, 16,909 were issuable on vesting of restricted stock units granted the executive under the 2000 Stock Plan and are subject to forfeiture. A portion of these shares will be withheld by the Company on vesting to satisfy tax withholding requirements.

2. This option is a portion of an option granted on November 16, 2009, which is exercisable as to 25% of the total shares granted on each of the first four anniversaries of the date of grant.

<u>Lynnette C. Fallon, as attorney</u> <u>in fact for Matthew P. Flynn</u> 12/09/2010

** 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.