| SEC Form 4 |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to Section 16. Form 4 or Form 5 | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|---|--|
| obligations may continue. See Instruction 1(b). | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |

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| | | | or Section 30(n) of the investment Company Act of 1940 | | | | | | |
|--|------------|-----------------|---|----------|---|-----------------------|--|--|--|
| 1. Name and Address of Reporting Person* | | | 2. Issuer Name and Ticker or Trading Symbol <u>AXCELIS TECHNOLOGIES INC</u> [ACLS] | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| <u>PUMA MARY G</u> | | | [] | X | Director | 10% Owner | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | X | Officer (give title below) | Other (specify below) | | | |
| C/O AXCELIS TECHNOLOGIES, INC. | | | 07/15/2010 | | Chairman, President and CEO | | | | |
| 108 CHERRY | HILL DRIVE | | | | | | | | |
| | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | idual or Joint/Group Filin | g (Check Applicable | | | |
| (Street) | | 01015 | | Line) | Form filed by One Reg | oorting Person | | | |
| BEVERLY | MA | 01915 | | | Form filed by More that | • | | | |
| (City) | (State) | (Zip) | | | Person | | | | |
| | | Table I - Non-D | Derivative Securities Acquired, Disposed of, or Benefi | cially C | Dwned | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Execution Date, Transaction if any Code (Instr. | | 4. Securities A Disposed Of (I | | | 5. Amount of Securities Beneficially Owned Following Reported | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|--|---|-----------------------------------|---------------|-------|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | (Instr. 4) |

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

| | (c.g., puis, variants, 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. Transa Code (8) | | Derivative | | 6. Date Exercia Expiration Dat (Month/Day/Ye | e | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |
| Stock option (right to buy) | \$1.6 | 07/15/2010 | | A ⁽¹⁾ | | 250,000 | | 07/15/2014 ⁽²⁾ | 07/15/2020 | Common Stock | 250,000 | \$0 | 250,000 | D | |

Explanation of Responses:

1. Granted Pursuant to the Axcelis Technologies, Inc. 2000 Stock Plan.

2. Exercisable as to 25% of the total shares on each of 7/15/2011, 7/15/2012, 7/15/2013 and 7/15/2014.

Lynnette C. Fallon, as attorney in fact for Mary G. Puma

Date

07/16/2010

** Signature of Reporting Person

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.