## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person * Bell Bobby R					2. Issuer Name and Ticker or Trading Symbol KLA TENCOR CORP [KLAC]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director10% Owner					
(Last) (First) (Middle) C/O KLA-TENCOR CORPORATION, ONE TECHNOLOGY DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 11/03/2010								X Officer (give title below) Other (specify below)  Executive Vice President					
(Street) MILPITAS, CA 95035				4. If	4. If Amendment, Date Original Filed(Month/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 Person					
(City) (State) (Zip)					Table I - Non-Derivative Securities Acqui								red, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	any	tion Date, if			ion	on 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Form:	p of Be	7. Nature of Indirect Beneficial	
				(Monti	h/Day/Year)	Co	de	V	Amount	(A) or (D)	Price	(Instr. 3	and 4)		Direct (D or Indirec (I) (Instr. 4)	direct (Instr. 4)		
Common Stock		11/03/2010			S			20,000	D	\$ 35.756	54 12,810	12,810		D				
Common Stock - Restricted Stock Units (2)									120,35	120,358 (3)								
Reminder:	Report on a s	separate line	for each class of secu Table II -	Deriv	ative Securi	ties A	cquire	Per cor the	rsons whatained in form dis	no res n this splays	form a s a curr Benefici	re not requently valid	OMB conf	ormation spond unle trol numbe	ss	C 147	74 (9-02)	
Security			Execution D any	ate, if	4. Transaction Code (Instr. 8)		5.		6. Date Exercisable and Expiration Date (Month/Day/Year)			Title and nount of aderlying curities str. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owne Form Deriva Securi Direct or Ind	of tive ty: (D) frect	Beneficial Ownership (Instr. 4)	
					Code V	(A)	(D)		te ercisable		Ti	Number of Shares						
Repor	ting O	wners																

### **Signatures**

Bell Bobby R

Reporting Owner Name / Address

C/O KLA-TENCOR CORPORATION

ONE TECHNOLOGY DRIVE MILPITAS, CA 95035

**Executive Vice President** 

Other

Relationships

Officer

10%

Owner

Director

**Signature of Reporting Person	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).
- This transaction was executed in multiple trades at prices ranging from \$35.75 to \$35.80. The price reported above reflects the weighted average purchase price. The (1) Reporting Person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and
- (1) Reporting Person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- $\textbf{(2)} \ \ \text{Each RSU represents a contingent right to receive one share of KLA-Tencor common stock.}$
- Opes not include performance-based RSUs, if any, held by the Reporting Person for which an assessment has not yet been made regarding the achievement of the applicable performance goals. Any such holdings will be reported on Form 4 within two business days of the date such assessment is made.

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.