FORM	4
------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

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

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 Type Responses)												
1. Name and Address of Glasser Lance A	2. Issuer Name and Ticker or Trading Symbol KLA TENCOR CORP [klac]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) 160 RIO ROBLES	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/21/2006						XOfficer (give title below) Other (specify below) Executive Vice President			
SAN JOSE, CA 951	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 Acquired, Disposed of, or Beneficially Owned									
1.Title of Security 2. Transaction			2A. Deemed	3. Transaction 4. Securities Acquired		5. Amount of Securities	6.	7. Nature				
(Instr. 3) Date			Execution Date, if	, if Code		(A) or Disposed of (D)		of (D)	Beneficially Owned Following	Ownership	of Indirect	
		(Month/Day/Year)	any (Instr. 8) (Instr. 3, 4 and 5)			Reported Transaction(s)	Form:	Beneficial				
			(Month/Day/Year)				(A) or		(Instr. 3 and 4)	Direct (D) or Indirect (I)	Ownership (Instr. 4)	
				Code	V	Amount	(D)	Price		(Instr. 4)		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1474 (9-02)

the form displays a currently valid OMB control number.

Persons who respond to the collection of information

contained in this form are not required to respond unless

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	on	Numl	Number and Expiration Date A		Amo	unt of	Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code		of	of (Month/Day/Year) U		Underlying Security		Securities	Form of	Beneficial		
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	rivative		Securities (Instr.		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					Secur	ities	ies		(Instr. 3 and			Owned	Security:	(Instr. 4)
	Security					Acqu	ired	ed		4)			Following	Direct (D)	
						(A) o	A) or				Reported	or Indirect			
						Disposed						Transaction(s)	(I)		
						of (D							(Instr. 4)	(Instr. 4)	
						(Instr	· · ·								
						4, and	.5)								
											Amount				
								Dete	E		or				
								Date Expiration Exercisable Date		Title	Number				
											of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Glasser Lance A 160 RIO ROBLES SAN JOSE, CA 95134			Executive Vice President						

Signatures

Lance Glasser	01/08/2007
**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).

Remarks:

Mr. Glasser resigned as an officer of the company, effective December 21, 2006.

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.