FORM 4

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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).

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 Typ	e Response	s)														
1. Name and Address of Reporting Person * Bellini Gilbert Antoine				2. Issuer Name and Ticker or Trading Symbol TEGAL CORP /DE/ [TGAL]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O 140 2ND STREET SUITE 318				3. Date of Earliest Transaction (Month/Day/Year) 03/27/2012								ve title below)		ner (specify below	<u>) </u>	
(Street) PETALUMA, CA 94952			4. If Amendment, Date Original Filed(Month/Day/Year)							_X_ F	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							Acquired,	lired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year					ite, if	3. Tra Code (Instr	(A :. 8) (I	Securities A A) or Dispos nstr. 3, 4 and (A) mount (D	sed of d 5)	uired of (D) Owned Follo				Ownership of Form:	Beneficial Ownership	
Actimidet. I	coport on a s	separate line for each	Table II - l	Derivativo	e Se	curitie	s Acc	Person contain form di quired, Dispo	s who respect in this splays a cosed of, or E	forn urre Benef	n are not ently valid ficially Ow	required OMB c	to respo	nd unless t		474 (9-02)
Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, i	4. if Transaction Code		5. Number of		s, options, convertible secur 6. Date Exercisable and Expiration Date (Month/Day/Year)		!	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownershi Form of Derivativ Security: Direct (D or Indirect	11. Nature of Indirec Beneficial Ownershi (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	n ,	Title	Amount or Number of Shares				
Non- Qualified Stock Option	\$ 3.43	03/27/2012		P		833		03/27/2013	3 03/27/20)22	Common Stock	833	\$ 3.43	4,165	D	
Repor	ting O	wners														

B C O N (A)	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Bellini Gilbert Antoine C/O 140 2ND STREET SUITE 318 PETALUMA, CA 94952	X						

Signatures

/c/Christine Hergenrother	05/04/2012
**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).
- (1) Options vest 1/12 per month for a year

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.