Hsia Liang Choo

Form 3

FORM 3 UNITED STATES SECURITIES AN Washington, I INITIAL STATEMENT OF BEN SECURI					D.C. 20549 NEFICIAL OWNERSHIP OF			OMB APPROVAL OMB 3235-0104 Number: January 31 Expires: 2005 Estimated average burden hours per		
		on 17(a) of	t to Section 16(a the Public Utilit 0(h) of the Inves	y Holdi	ng Company	Act of 1935		response	•	
(Print or Type Re	sponses)									
1. Name and Address of Reporting Person <u>*</u> Hsia Liang Choo			2. Date of Event Requiring Statement (Month/Day/Year) 3. Issuer Name <b>and</b> Ticker or Trading S PHOTRONICS INC [PLAB]				ibol			
(Last)	(First)	(Middle)	01/03/2012		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
15 SECOR R	D.						riied(i	vionin/Day/Ye	ar)	
(Street)					(Check all applicable)		6. Indi	6. Individual or Joint/Group		
BROOKFIELD, CT 06804				OfficerOtherX (give title below) (specify below) Per		() _X_Fc () Person Fo	ing(Check Applicable Line) _ Form filed by One Reporting son _ Form filed by More than One porting Person			
(City)	(State)	(Zip)	Ta	ble I - N	Non-Derivat	ive Securitie	s Beneficia	ally Owne	d	
1.Title of Securit (Instr. 4)	ij		Ber	Amount of neficially str. 4)	f Securities Owned	Ownership	4. Nature of I Ownership (Instr. 5)	ndirect Bene	ficial	
Reminder: Repor owned directly or			ach class of securitie	s benefici	ially S	EC 1473 (7-02)				
	inforr requi	nation cont red to respo	pond to the colle ained in this form ond unless the for MB control numb	are not rm displ						
Та	ble II - De	rivative Secu	rities Beneficially (	Owned (e.	g., puts, calls,	warrants, optic	ons, converti	ble securitie	s)	
1. Title of Deriva (Instr. 4)	ative Securi	Expi	ate Exercisable and ration Date <sub>v/Day/Year</sub> )	Securiti	and Amount of es Underlying ive Security	4. Conversior or Exercise Price of		p Benefici (Instr. 5	e of Indirect ial Ownership )	

Date

Exercisable Date

Expiration

Title

Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
Hsia Liang Choo 15 SECOR RD. BROOKFIELD, CT 06804	ÂX	Â	Â	Â		
Signatures						
/s/ Richelle Burr, attorney-in-fa Dr. Hsia	0	01/05/2012				
**Signature of Reporting Person	L		Date			

## **Explanation of Responses:**

## No securities are beneficially owned

\* If the form is filed by more than one reporting person, see Instruction 5(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. 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.