Edgar Filing: PHOTRONICS INC - Form 4

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Form 4	LS INC										
January 06, 2	016										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								-	PROVAL 3235-0287		
Check this box Expires: Januar											
(Print or Type R	(esponses)										
MACRICOSTAS GEORGE Symbol			Symbol	er Name and Ticker or Trading RONICS INC [PLAB]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				(Chec	к ан аррисаве	;)		
15 SECOR ROAD 01/04/20 (Street) 4. If Amer			`	Month/Day/Year))1/04/2016				X_ Director Officer (give below)		o Owner er (specify	
			nendment, Date Original fonth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
						Iore than One Reporting					
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea		ned 1 Date, if	3.	4. Securiti n(A) or Dis (D) (Instr. 3, 4	ies Ac sposed	quired of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	-	
Common Stock	01/04/2016			А	12,000	A	\$0	34,000	D		

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

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 control number.

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

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	nsactionNumber Expi e of (Mor		cisable and ate 'Year)	7. Title and Amount of Underlying Securities (Instr. 3 and	8. Price of Derivative Security (Instr. 5)4)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title Amou or Numb of Share	ber	

Reporting Owners

Reporting Owner Name / Address				
I B	Director	10% Owner	Officer	Other
MACRICOSTAS GEORGE 15 SECOR ROAD BROOKFIELD, CT 06804	Х			
Signatures				
/s/ Richelle E. Burr, attorney-ir Macricostas	01/06/2016			

**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).

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.