## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|             |      |       |

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5           |
| obligations may continue. See          |
| notruction 1/h)                        |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

| 1. Name and Address of Reporting Person*  MACRICOSTAS CONSTANTINE S  |          |        |           |  |          | 2. Issuer Name <b>and</b> Ticker or Trading Symbol PHOTRONICS INC [ PLAB ] |          |   |                    |  |                     |  |               |                             |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |   |   |  |  |  |
|--|----------|--------|-----------|--|----------|--|----------|---|--------------------|--|---------------------|--|---------------|-----------------------------|--|---|--|---|---|--|--|--|
| (Last)   | (Fi      |        | Middle)   |  |          | 3. Date of Earliest Transaction (Month/Day/Year)                           |          |   |                    |  |                     |  |               |                             | X<br>X   | Offic<br>below  | er (give title<br>w)   | Ot<br>be  | 10% Owner Other (specify below)                                   |  |  |  |
| 15 SECOR ROAD<br>P.O. BOX 5226   |          |        |           |  | 07/      | 07/30/2015   |          |   |                    |  |                     |  |               |                             |  | Executive Chairman  |  |   |   |  |  |  |
| (Street)   | FIELD CT | Γ (    | 06804     |  | 4. If    | Ame  | endment, | Date o  | of Original        | l Filed  | ed (Month/Day/Year) |  |               |                             | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |   |  |   |   |  |  |  |
| (City)   | (St      | ate) ( | Zip)      |  |          |  |          |   |                    |  |                     |  |               |                             |  | 1 013   |  |   |   |  |  |  |
|  |          | Tabl   | e I - Noi | n-Deriv                                  | ative    | Se   | curitie  | s Ac  | quired,            | Dis  | posed o             | f, o   | r Ber         | efici                       | ally (   | Owne  | ed   |   |   |  |  |  |
| Date   |          |        | Date      | . Transaction<br>Pate<br>Month/Day/Year) |          | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year)                |          | 3.<br>Transaction<br>Code (Instr.<br>8)                                       |                    | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5) |                     |  |               | l and Secur<br>Bene<br>Owne |  | icially<br>d Following  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)  |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |  |
|  |          |        |           |  |          |  |          |   | Code               | v  | Amount              |  | (A) or<br>(D) |                             | . 1  | Reported<br>Transaction(s)<br>(Instr. 3 and 4)                          |  |   |   | (30. 4)  |  |  |
| Common Stock 0   |          |        |           | 07/30                                    | /30/2015 |  |          |   | P                  |  | 4,000(1             | 1)   | A             | \$7.2                       | 25 <sup>(2)</sup>  | 534,247   |  | D   | D   |  |  |  |
| Common Stock   |          |        |           |  |          |  |          |   |                    |  |                     |  |               |                             |  |   | 34,568   | I   | В   | Owned<br>Sy<br>Vife <sup>(3)</sup>                                 |  |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)   |          |        |           |  |          |  |          |   |                    |  |                     |  |               |                             |  |   |  |   |   |  |  |  |
| 1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  (Instr. 3)  3. Transaction Date (Month/Day/Year)  3A. Deemed Execution Date, if any (Month/Day/Year) |          |        |           | Date,                                    |          | nsaction cle (Instr. E   |          | of Derivative (Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |                    | on Date  |                     | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr<br>and 4) |               | nstr. 3                     | Deriv<br>Secu  | rivative<br>curity<br>str. 5)   | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(<br>(Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | nip of<br>B<br>) O<br>ct (li                                      | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|  |          |        |           |  | Code     |  |          | Date<br>Exercisa  | ate Exercisable Da |  | Title               | of<br>e Sh   | ares          |                             |  |   |  |   |   |  |  |  |

## **Explanation of Responses:**

- 1. Represents 4,000 shares of Photronics, Inc. Common Stock purchased under the Company's Employee Stock Purchase Plan.
- 2. The purchase price of the shares pursuant to the Employee Stock Purchase Plan is 85% of the fair market value (the "Closing Price") of the Common Stock of the Company on the purchase date of the applicable purchase period as defined in the 2014 Twenty-Third Offering Plan documents.
- 3. Mr. Macricostas disclaims beneficial ownership of these shares.

/s/ Richelle E. Burr, attorney-

in-fact for Constantine S.

Macricostas

\*\* Signature of Reporting Person

Date

08/03/2015

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

- \* 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.

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 Number.