FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	3235-0104						
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	dress of Reporting	P (	2. Date of Event Requiring Stater Month/Day/Year 05/24/2010	g Statement lay/Year)  PHOTRONICS INC [ PLAB ]							
(Last) (First) (Middle) GMT CAPITAL CORP					Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)			
2100 RIVEREDGE PARKWAY SUITE 840					Officer (give title below)	Other (spe	ecify	6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street) ATLANTA	GA	30328						X		y One Reporting Person y More than One erson	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				Amount of Securities eneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock				1,325,600	D <sup>(1)(2)</sup>	(3)					
Common Stock					1,343,000	D(1)(2)(4)					
Common Stock					2,366,685	D <sup>(1)(2)(5)</sup>					
Common Stock					191,300	D(1)(2)(6)					
Common Stock					186,700	D <sup>(1)(2)(7)</sup>					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable a Expiration Date (Month/Day/Year)			ate	Underlying Derivative Security (Instr. 4) Conve		Conver or Exer	rcise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price o Derivat Securit	ive	Direct (D) or Indirect (I) (Instr. 5)		

## **Explanation of Responses:**

- 1. This Form 3 is being jointly filed by Bay Resource Partners, L.P., a Delaware limited partnership ("Bay"), Bay II Resource Partners, L.P., a Delaware limited partnership ("Bay II"), Bay Resource Partners Offshore Master Fund, L.P., an exempted limited partnership organized under the laws of the Cayman Islands ("Offshore Fund"), GMT Capital Corp., a Georgia corporation ("GMT Capital"), and Thomas E. Claugus, a United States citizen ("Claugus"). The foregoing persons are hereinafter sometimes collectively referred to as the Reporting Persons.
- 2. GMT Capital, the general partner of Bay and Bay II, has the power to direct the affairs of Bay and Bay II, including the voting and disposition of shares. As the discretionary investment manager of the Offshore Fund and certain other accounts, GMT Capital has power to direct the voting and disposition of shares held by the Offshore Fund and such accounts. Mr. Claugus is the President of GMT Capital and in that capacity directs the operations of each of Bay and Bay II and the voting and disposition of shares held by the Offshore Fund and separate client accounts managed by GMT Capital. GMT Capital and Mr. Claugus may be deemed to beneficially own indirect pecuniary interest as the result of performance-based fees and profit allocations. Each of GMT Capital and Mr. Claugus disclaims such beneficial ownership except to the extent ultimately realized.
- 3. Owned directly by Bay
- 4. Owned directly by Bay II.
- 5. Owned directly by the Offshore Fund.
- 6. Owned beneficially by GMT Capital due to management of separate client accounts.
- 7. Owned directly by Claugus.

<u>Thomas E. Claugus</u> <u>05/25/2010</u>

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.

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.