FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 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

1. Name and Address of Reporting Person* MACRICOSTAS CONSTANTINE S							2. Issuer Name and Ticker or Trading Symbol PHOTRONICS INC PLAB								S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 15 SECOR ROAD						3. Date of Earliest Transaction (Month/Day/Year) 01/09/2007									Officer (give title Other (specify below) below)					
(Street) BROOKFIELD CT 06804					4. 1	4. If Amendment, Date of Original Filed (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)	((State		Zip)																
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				on	2A. Dee Executi if any	Deemed ution Date,		3. Transaction Code (Instr. 8)		A. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)		d (A) or	5. Amount Securities Beneficiall Owned Fol Reported	of y	f 6. Owners Form: Dir (D) or Indi		. Nature of ndirect Beneficial Dwnership nstr. 4)			
									Code	v	Amount	(A) or (D)	Price	Transactio	Transaction(s) (Instr. 3 and 4)			(11341.4)		
Common	Stock														34,0	00	I		Owned By Vife ⁽¹⁾	
Common Stock															2,280,000		I		Owned By Limited Partnership ⁽²⁾	
Common Stock															50,6	50,618 I			Owned By Corporation ⁽³⁾	
Common Stock					01/09/2007					S		5,000	D	\$16	254,7	'46	D			
Common Stock					01/09/2007					S		5,000	D	\$16.05	249,7	46 D				
Common Stock				01/09/2007					S		13,600	D	\$16.1	236,1	146 D					
Common Stock				01/09/2007					S		300	D	\$16.11	235,8	5,846 D					
Common Stock				01/09/2007					S		300	D	\$16.12	235,5	46 D					
Common Stock 0				01/09/2007					S		800	D	\$16.13			D				
Common Stock 01/09/200				07	_					15,000	D	\$16.15	 		D					
Common Stock 01/09/2007								S		5,000	D	\$16.16			D					
			Та	ble I								posed of, , convertib				l				
Security or Exercise (Month/Day/Year) if any		tion Date, Trans		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired sed	Expiration (Month/Da			7. Title Amou Secur Under Deriva Secur and 4)	nt of ities lying itive ity (Instr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersi Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)				
Explanation						Code	v	(A)	(D)	Date Exer	cisabl	Expiration e Date	Title	Amount or Number of Shares						

- 1. Mr. Macricostas disclaims beneficial ownership of these shares.
- 2. Represents all of the shares held by a limited partnership of which Mr. Macricostas owns limited partnership interests. Mr. Macricostas disclaims beneficial ownership of those shares not represented by his limited partnership interests.
- 3. Represents all of the shares held by a corporation of which Mr. Macricostas owns a significant interest. Mr. Macricostas disclaims beneficial ownership of those shares not represented by his ownership interest. This corporation serves as the general partner of the limited partnership referred to above.

/s/ Edwin L. Lewis, attorneyin-fact for Constantine S. Macricostas

01/11/2007

** Signature of Reporting Person

Date

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.	