Edgar Filing: IRVIN JOHN - Form 4/A

IDVIN IOUN

Form 4/A May 02, 2013											
FORM									OMB A	PPROVAL	
	UNITE	D STATES			ND EX(D.C. 20:		NGE (COMMISSION	OMB Number:	3235-0287	
Check this if no long subject to Section 10 Form 4 or	er STAT	EMENT O	GES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: January 31 200 Estimated average burden hours per response 0.			
Form 5 obligation may conti <i>See</i> Instru 1(b).	nue. Section	7(a) of the		ility Hold	ding Con	pany	Act o	ge Act of 1934, f 1935 or Sectic 40			
(Print or Type R	esponses)										
IDVIN IOUN			Symbol	-				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	ExOne Co [XONE]										
(Month 02/06 (Street) 4. If A Filed(M			3. Date of Earliest Transaction (Month/Day/Year) 02/06/2013					XDirector10% Owner XOfficer (give titleOther (specify below) below) Chief Financial Officer			
			Filed(Mon	If Amendment, Date Original iled(Month/Day/Year) 2/13/2013				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
NORTH HU	NTINGDON	, PA 15642	02/15/20	,10				Form filed by I Person	More than One Ro	eporting	
(City)	(State)	(Zip)	Table	e I - Non-E	Derivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Yo	ear) Executio any	emed on Date, if 'Day/Year)	3. Transacti Code (Instr. 8)	4. Securi ionAcquired Disposed (Instr. 3,	l (A) o l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, par value \$0.01	02/06/2013 <u>(</u>	<u>1)</u>		Code V P	7 Amount 3,000 (2)	(D) A	Price \$ 0	(insu: 5 and 4) 322,000	I <u>(1)</u>	By wife	

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
, of the second s	Director	10% Owner	Officer	Other				
IRVIN JOHN			Chief					
127 INDUSTRY BOULEVARD	Х		Financial					
NORTH HUNTINGDON, PA 15642			Officer					
Signatures								
/s/ JoEllen Lyons Dillon, attorney-in-fac Irvin	05/01/2013							
<u>**</u> Signature of Reporting Person		Da	te					

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).
- (1) This Form 4 amends the Form 4 filed by Mr. Irvin on February 13, 2013 to correct the transaction date and to change the ownership form.
- (2) Mr. Irvin's wife is the owner of the 3,000 shares. Mr. Irvin disclaims beneficial onwership of these shares, and this report shall not be deemed to be an admission that Mr. Irvin is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.

Remarks:

Exhibit List:

Exhibit 24 - Power of Attorney

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.