SEC F	orm 4
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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 Instruction 1(b)
)	Section 16. Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

			of Section So(ii) of the investment Company Act of 1940					
1. Name and Address of Reporting Person [*] Maida Robert P			2. Issuer Name and Ticker or Trading Symbol ALLIED MOTION TECHNOLOGIES INC [AMOT]		ationship of Reporting Po k all applicable) Director Officer (give title below)	erson(s) to Issuer 10% Owner Other (specify below)		
(Last) (First) (Middle) ALLIED MOTION TECHNOLOGIES INC. 495 COMMERCE DRIVE, SUITE 3		OLOGIES INC.	3. Date of Earliest Transaction (Month/Day/Year) 03/12/2019		VP Operational Excellence			
(Street) AMHERST (City)	NY (State)	14228 (Zip)	 4. If Amendment, Date of Original Filed (Month/Day/Year) 03/14/2019 	6. Indi Line) X	vidual or Joint/Group Fili Form filed by One Re Form filed by More th Person	eporting Person		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)					5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code V		Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock	03/12/2019		Α		1,496	A	(1)	52,758	D		
Common Stock	03/12/2019		Α		1,496	A	(2)	54,254	D		
Common Stock								2,187	I	By ESOP Trust	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(e.g., puts, cans, warrants, options, convertible securities)															
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. Transa Code (8)		of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Grant of time-based restricted shares pursuant to the Company's 2017 Omnibus Incentive Plan. These restricted shares vest one-third each on April 1, 2020, 2021 and 2022.

2. Grant of performance-based restricted shares pursuant to the Company's 2017 Omnibus Incentive Plan. All or a portion of these restricted shares will vest over a three year period upon satisfaction of certain performnace goals established by the Compensation Committe for the year ending December 31, 2019.

Remarks:

The Reporting Person reported certain restricted stock awards on a Form 4 filed March 14, 2019 (the "Original Form 4"). The Original Form 4 inadvertently overstated the number of restricted shares awarded by 110 shares in the aggregate. This amended Form 4 corrects the number of restricted shares awarded and the number of shares owned following the reported transactions.

Susan M. Chiarmonte,	
<u>attorney-in-fact for Robert P.</u>	03/28
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** Signature of Reporting Person Date /2019

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.

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