SEC Form 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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

### OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person*         Maida Robert P         (Last)       (First)         455 COMMERCE DRIVE, STE 5		(Middle)	2. Issuer Name and Ticker or Trading Symbol ALLIED MOTION TECHNOLOGIES INC [ AMOT ] 3. Date of Earliest Transaction (Month/Day/Year) 02/16/2013		ationship of Reporting Per < all applicable) Director Officer (give title below) Chief Financial	10% Owner Other (specify below)
(Street) AMHERST (City)	NY (State)	14228 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	vidual or Joint/Group Filin Form filed by One Rep Form filed by More tha Person	orting 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)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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	02/16/2013		A		2,000 <sup>(1)</sup>	A	\$ <mark>0</mark>	8,000	D	
Common Stock	02/16/2013		A		4,000 <sup>(2)</sup>	A	\$0	12,000	D	
Common Stock	02/16/2013		A		<b>6,000</b> <sup>(3)</sup>	A	\$0	18,000	D	

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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of E		6. Date Exerc Expiration Da (Month/Day/Y	7. Title Amour Securi Underl Deriva Securi and 4)	nt of ties ying tive ty (Instr. 3	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 restricted shares pursuant to the Company's 2007 Stock Incentive Plan. These restricted shares vest one-third each on March 31, 2014, 2015 and 2016.

2. Grant of restricted shares pursuant to the Company's 2007 Stock Incentive Plan. All or a portion of these restricted shares will vest upon the satisfaction of certain performance goals established by the Compensation Committee for the year ending December 31, 2013.

3. Grant of restricted shares pursuant to the Company's 2007 Stock Incentive Plan. All or a portion of these restricted shares will vest upon the satisfaction of certain performance goals established by the Compensation Committee for any year during the five-year period ending December 31, 2017.

#### **Remarks:**

<u>Susan M. Chiarmonte,</u> <u>attorney-in-fact for Robert P.</u> <u>Maida</u>

02/20/2013

\*\* 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.