FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average burd	en										
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 $^*$ Smith Brian K						2. Issuer Name <b>and</b> Ticker or Trading Symbol Proto Labs Inc [ PRLB ]									ck all app	,			
(Last) (First) (Middle) 5540 PIONEER CREEK DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 08/24/2012									Offic belo	er (give title w)		ner (specify ow)	
(Street)  MAPLE PLAIN MN 55359  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line)	Forn Forn	ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date						Execution Date,		3. Transaction Disposed 5) 4. Security Disposed 5)					Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect ct Beneficial Ownership			
									Code	v	Amount	(A)	or	Price	Trans	action(s) 3 and 4)		(Instr. 4)	
Common Stock 08/24/2							012		S		10,000		D	\$32.25	264,396		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Da			3A. Deem Execution if any (Month/D	n Date,	Date, Transacti Code (Ins				6. Date E Expiratio (Month/D	n Dat	е	nd 7. Title Amour Securit Under! Derivat Securit and 4)		tr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Num of Shar	.					

**Explanation of Responses:** 

Remarks:

/s/ Julie M. Regnier, Attorney-08/28/2012 in-Fact for Brian K. Smith

\*\* 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.