

ADE CORP  
Form 4  
May 11, 2001

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FORM 4  
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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  
Section 17(a) of the Public Utility Holding Company Act of 1935 or  
Section 30(f) of the Investment Company Act of 1940

(Print or Type Response)

|  |           |   |  |                             |      |      |
|--|-----------|---|--|-----------------------------|------|------|
| 1. Name and Address of Reporting Person* |           | 2. Issuer Name and Ticker or Trading Symbol | 6. Relat Person  |                             |      |      |
| KOLIOPOULOS, CHRIS L.                    |           | ADE CORPORATION (ADEX)                      | (Cheo  |                             |      |      |
| (Last)                                   | (First)   | (Middle)                                    | 3. IRS or Social Security Number of Reporting Person (Voluntary) | 4. Statement for Month/Year | x    | Dire |
| 3480 EAST BRITANNIA                      | SUITE 110 |   | 04/01  |                             | Offi | (tit |
|  |           |   |  |                             | Pres | owne |
| (Street)                                 |           |   | 5. If Amendment, Date of Original (Month/Year)                   | 7. Ind Fil                  |      |      |
| TUCSON, AZ 87506                         |           |   |  | x For                       |      |      |
| (City)                                   | (State)   | (Zip)                                       | TABLE 1 - NON-DERIVATIVE SECURITIES ACQUIRED, DISPOSED O         |                             |      |      |

| 1. Title of Security (Instr. 3) | 2. Trans- action Date | 3. Trans action Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amou       |
|---------------------------------|-----------------------|---------------------------------|---|---------------|
|                                 | (Month/Day/Year)      | Code V                          | Amount (A) or (D)   | Price (Instr. |

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|              |         |   |       |   |         |      |
|--------------|---------|---|-------|---|---------|------|
| Common Stock | 4/10/01 | S | 1,300 | D | \$13.50 |      |
| Common Stock | 4/11/01 | S | 8,700 | D | \$13.50 | 1,08 |

Reminder: Report on a separate line for each class of securities beneficially owned directly  
 \* If the form is filed by more than one reporting person, SEE Instruction 4(b) (v).

FORM 4 (continued)

TABLE II - DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF, OR BENEFICIAL  
 (E.G., PUTS, CALLS, WARRANTS, OPTIONS, CONVERTIBLE SECURITIES)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2. Conversion or<br>Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/<br>Day/<br>Year) | 4. Transaction<br>Code<br>(Instr.<br>8) | 5. Number of<br>Derivative<br>Securities<br>Acquired<br>(A) or Dis-<br>posed of (D)<br>(Instr. 3,<br>4 and 5) | 6. Date Exer-<br>cisable and<br>Expiration<br>date (Month/<br>Day/<br>Year) | 7. Title<br>and<br>Amount<br>of<br>Under-<br>lying)<br>Securi-<br>ties<br>(Instr.<br>3 and 4) | 8. Price<br>of<br>Deriv-<br>ative<br>Secur-<br>ity<br>Instr.<br>5) | 9. |
|---|--|--|---|---|---|---|--|----|
|---|--|--|---|---|---|---|--|----|

| Code | V | (A) | (D) | Date<br>Exer-<br>isable | Expira-<br>tion<br>Date | Title | Amount or<br>Number of<br>Shares |
|------|---|-----|-----|-------------------------|-------------------------|-------|----------------------------------|
|      |   |     |     |                         |                         |       |                                  |
|      |   |     |     |                         |                         |       |                                  |
|      |   |     |     |                         |                         |       |                                  |
|      |   |     |     |                         |                         |       |                                  |
|      |   |     |     |                         |                         |       |                                  |
|      |   |     |     |                         |                         |       |                                  |
|      |   |     |     |                         |                         |       |                                  |
|      |   |     |     |                         |                         |       |                                  |
|      |   |     |     |                         |                         |       |                                  |
|      |   |     |     |                         |                         |       |                                  |

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Explanation of Responses:

\*\* Intentional misstatements or omissions of facts constitute  
Federal Criminal Violations.  
SEE 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

/s/ Chris L. Koliopoulos

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\*\*Signature of Reporting Person

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.