Edgar Filing: Groves Douglas L - Form 4

Groves Doug	glas L											
Form 4												
March 15, 20	019											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287				
Check th							Expires:	January 31,				
if no longer subject to STATEMENT OF						ICIA		NERSHIP OF	Estimated a	2005 average		
Section 16. SECURITIES								burden hou	rs per			
Form 4 o Form 5	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5			
obligatio	ns Section 1'						-	7 1935 or Section	n			
may cont See Instr	inue.) of the In	•	•	· ·	•		11			
1(b).	uction	()			· · ·	5						
(Print or Type I	Responses)											
1. Name and Address of Reporting Person _ 2. Issuer Name and Ticker or Trading 5. Relationship of F								Reporting Pers	son(s) to			
Groves Dou		2. Issuer Name and Ticker or Trading Symbol DUCOMMUN INC /DE/ [DCO]				Issuer						
	-											
(Last)	(First)	(Middle)	3. Date of	f Earliest Tr	ansaction			(Chec	k all applicable)			
				(Month/Day/Year)				Director 10% Owner				
				3/13/2019				XOfficer (give titleOther (specify below) below)				
							FO & Treasure	er				
	4. If Ame	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check						
Filed(Month/Day/Year)						Applicable Line)						
SANTA ANA, CA 92707-5759												
SANTA AN	NA, CA 92707	5759						Person				
(City)	(State)	(Zip)	Tabl	e I - Non-E	D erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction D	ate 2A. Dee	emed	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yea		on Date, if	Transaction(A) or Disposed of (D) $(L + 2A + 15)$				Securities	Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership			
(Instr. 3)		any (Month/	Code(Instr. 3, 4 and 5)Day/Year)(Instr. 8)				5)	Beneficially Owned		Ownership		
								Following (Instr. 4) (Instr. 4)				
						(A)		Reported Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common					8,796			44.000				
Stock	03/13/2019			А	(1)	А	(2)	41,279	D			
Common					3,042		\$					
Stock	03/13/2019			F	(3)	D	44.64	38,237	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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						
	Director	10% Owner	Officer	Other			
Groves Douglas L 200 SANDPOINTE AVENUE SUITE 700 SANTA ANA, CA 92707-5759			VP, CFO Treasurer	&			
Signatures							

Douglas L. Groves 03/15/2019 <u>**</u>Signature of Date Reporting Person

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) Acquired upon the settlement of performance stock units granted on March 23, 2016 under the Ducommun Incorporated Stock Incentive Plan as a result of the satisfaction of the performance criteria underlying the award.
- (2) Granted as compensation for services.
- (3) Represents a reduction in shares to satisfy the tax withholding obligations of the Issuer with respect to the settlement, on March 13, 2019, of 8,796 performance stock units, as described in footnote (1) above.

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.