Edgar Filing: DUCOMMUN INC /DE/ - Form 4

| | UN INC /DE/ | | | | | | | | | |
|--|---|--|--|--|--|---|--|--|--|--|
| Form 4 August 02, 2 | 2013 | | | | | | | | | |
| | ЛЛ | | | | | | | | PPROVAL | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | | 3235-0287 | |
| Check the if no lor subject Section Form 4 Form 5 | nger to 16. or Filed pur | er STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 6. SECURITIES | | | | | | Number: Expires: Estimated burden hou response | urs per | |
| obligatio may cor <i>See</i> Inst 1(b). | ntinue. Section 17(ruction | | | • | • | mpany Act ny Act of 1 | of 1935 or Sectio 1940 | on | | |
| (Print or Type | Responses) | | | | | | | | | |
| | Address of Reporting N ANTHONY J | Person [*] | Symbol | er Name and MMUN I | | - | 5. Relationship o Issuer | | | |
| (Last) | (First) (| Middle) | | of Earliest T | | | (Che | ck all applicabl | e) | |
| | IUN RATED, 23301 TON AVE. | | (Month/ 07/31/2 | Day/Year) 2013 | | | X Director X Officer (giv below) Chairman | | % Owner her (specify I CEO | |
| (Street) | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | al | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| CARSON, | CA 90745 | | | | | | | More than One R | | |
| (City) | (State) | (Zip) | Tal | ole I - Non-l | Derivative | e Securities A | Acquired, Disposed o | of, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution any | ed Date, if | 3. Transactio Code (Instr. 8) Code V | 4. Securi nAcquired Disposed (Instr. 3, | ties I (A) or I of (D) 4 and 5) (A) or | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect | |
| Reminder: Re | port on a separate line | e for each cla | ass of sec | urities bene | ficially ow | ned directly | or indirectly. | | | |
| | | | | | inforı requi | mation con red to resp ays a curre | spond to the collec tained in this form ond unless the for ntly valid OMB col | are not m | SEC 1474 (9-02) | |
| | Tab | | | | - | sposed of, or convertible | Beneficially Owned securities) | | | |
| | | saction Date /Day/Year) | | | 4. Transact | 5. Number tiorDerivative | | | 7. Title and Amount of Underlying Securities | |

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| Security (Instr. 3) | or Exercise Price of Derivative Security | | any (Month/Day/Year) | Code (Instr. 8 | 8) . | Securities Acquired or Dispose (D) (Instr. 3, 4 and 5) | (A) ed of | (Month/Day/Year | ;) | (Instr. 3 and 4 | 4) |
|-----------------------------------|---|------------|-------------------------|-------------------|------|---|--------------|------------------|--------------------|-----------------|------------------------------------|
| | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Share |
| Option - Right to Buy (1) | \$ 22.84 | 07/31/2013 | | А | | 37,500 | | 07/31/2014(2) | 07/30/2020 | Common Stock | 37,500 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|-----------------------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| REARDON ANTHONY J DUCOMMUN INCORPORATED 23301 WILMINGTON AVE. CARSON, CA 90745 | X | | Chairman, President and CEO | | | | |
| Signatures | | | | | | | |
| /s/ Anthony J. | ~ | | | | | | |

| Reardon | 08/02/2013 | | | |
|--|------------|--|--|--|
| <u>**</u> Signature of Reporting Person | Date | | | |

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) The option represents the right to purchase common stock under the Ducommun Incorporated Employee Stock Option Plans, which are Rule 16b-3 plans.
- (2) The option will vest in four equal installments on July 31, 2014, July 31, 2015, July 31, 2016 and July 31, 2017.

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.