SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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

| 1. Name and Address of Reporting Person* | | | | | | 2. Issuer Name and Ticker or Trading Symbol DUCOMMUN INC /DE/ [DCO] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|--|--|------------|--|--|--------------------------------------|---|--|---|--------------------|--|-----------------------------------|---|---|--|---|--|--|--|
| <u>CROSBY RALPH D JR</u> | | | | | | | | | | | | | | | Directo | r | | 10% Ov | vner | |
| (Last) (First) (Middle) 8400 OLD DOMINION DR. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/31/2012 | | | | | | | | | Officer below) | (give title | | Other (s below) | specify | | |
| 0400 OLD DOMINION DK. | | | | | | | | | | | | | | | | | | | | |
| | | | | | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) MCLEAN VA 22102-12 | | 22102-121 | 10 | | | | | | | | | | | Form fi | led by One | d by One Reporting Person | | | | |
| | EAN VA 22102-12. | | 22102-1210 | U | | | | | | | | | | | Form fi Person | | re than | One Repoi | ting | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | /Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | Securitie Beneficia Owned F | 5. Amount of Securities Beneficially Owned Following Reported | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (A) ((D) | or I | Price | Transact (Instr. 3 a | on(s) | | | (instr. 4) | |
| 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 Da if any (Month/Day/ [\] | ate, T | Code (Ins | | Deri Seci Acq or D of (E | umber of vative urities uired (A) isposed D) (Instr. and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | curity | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | c | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | or Nu of | umber | | (Instr. 4) | | | | |
| Phantom Stock | (1) | 03/31/2012 | | | A | | | 1,355.04 | (2) | | (2) | Common Stock | n | 0 | \$11.9 | 17,348 | .57 | D | | |

Explanation of Responses:

1. 1-for-1

2. The shares of phantom stock become payable upon the reporting person's termination of service as a director.

/s/ Ralph D. Crosby, Jr.

** Signature of Reporting Person

04/02/2012

Date

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

 \ast 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.