FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |  |
|-------------|------|-------|--|
| Washington, | D.C. | 20549 |  |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |     |  |  |  |  |  |  |  |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-0287    |     |  |  |  |  |  |  |  |
| Estimated average burden |     |  |  |  |  |  |  |  |
| 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*  FLATT DEAN M        |  |  |              |                              | 2. Issuer Name <b>and</b> Ticker or Trading Symbol DUCOMMUN INC /DE/ [ DCO ] |  |        |  |         |   |          |               |  | ck all app   | ,                    |   |  |         |          |  |
|---|--|--|--------------|------------------------------|--|--|--------|--|---------|---|----------|---------------|--|--|----------------------|---|--|---------|----------|--|
| (Last) (First) (Middle) 112 HARRISON AVENUE                   |  |  |              |                              | 3. Date of Earliest Transaction (Month/Day/Year) 05/07/2020                  |  |        |  |         |   |          |               |  | Office<br>below  | er (give title<br>v) |   | Other (<br>below)  | specify |          |  |
| (Street)  MONTO  (City)                                       | LAIR N.  |  | 7042<br>Zip) |                              | 4. If A  |  |        |  |         |   |          |               |  |  | Form                 | dual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person |  |         |          |  |
|   |  | Table                                      | I - Noi      | n-Deriva                     | tive S   | Secu   | rities | Acq  | uired,  | Dis   | posed of | , or E        | 3ene   | ficial   | ly Own               | ed  |  |         |          |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |  |  |              | Execution Date,              |  | 3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) |        |  |         |   |          | Forn<br>(D) o | wnership<br>n: Direct<br>or Indirect<br>nstr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |                      |   |  |         |          |  |
|   |  |  |              |                              |  |  |        |  | Code    | v   | Amount   | (A)<br>(D)    | or F   | Price  | Transa               | ction(s)<br>3 and 4)  |  |         | (1130.4) |  |
| Common Stock 05/  |  |  | 05/07/       | 2020                         |  | A  |        | 2,440  | 440 A S |   | \$0.00   | 0 30,140      |  |  | D                    |   |  |         |          |  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |              |                              |  |  |        |  |         |   |          |               |  |  |                      |   |  |         |          |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | if any       | med<br>on Date,<br>Day/Year) |  | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)   |        | 6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date |         | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)  Amou or Numb of Title Share |          | str.          | Price of<br>erivative<br>ecurity<br>nstr. 5)     | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | y                    | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4)  | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |         |          |  |

**Explanation of Responses:** 

Remarks:

Dean M. Flatt

05/08/2020

\*\* 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.