FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL						
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* HEISER JAMES S (Last) (First) (Middle) DUCOMMUN INCORPORATED 23301 WILMINGTON AVE. (Street)							2. Issuer Name and Ticker or Trading Symbol DUCOMMUN INC /DE/ [DCO] 3. Date of Earliest Transaction (Month/Day/Year) 03/27/2017 4. If Amendment, Date of Original Filed (Month/Day/Year)									S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) VP & General Counsel 6. Individual or Joint/Group Filing (Check Applicable Line)					
CARSON CA 90745 (City) (State) (Zip)																X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - Nor	-Deriv	ative	Se	curitie	es Acc	quired,	Dis	posed o	f, o	r Ben	eficia	ally (Owne	ed				
Date					Date Exe (Month/Day/Year) if ar		Execution if any	A. Deemed Execution Date, f any Month/Day/Year)					rities Acquired (A) ed Of (D) (Instr. 3,			5. Amo Securi Benefic Owned Report	ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(11150.4)	
Common Stock 03/27						7/2017					423		D	\$27.8		12,824		D)		
	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)	titive Conversion Date Execution ity or Exercise (Month/Day/Year) if any		Date, Transaction Code (Instr.		of Deriv Secu Acqu (A) of Disp	r osed) r. 3, 4	Expiration (Month/E	Date Exercisable and xpiration Date And the Andrews An			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Dire or In (I) (II	ership n: ct (D) direct nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

Remarks:

James S. Heiser

03/29/2017

** 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.