## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## 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 APPROVAL								
OMB Number:	3235-0287							
Estimated average burd	en							
hours per response:	0.5							

1. Name and Address of Reporting Person <sup>*</sup> Oswald Stephen G			2. Issuer Name and Ticker or Trading Symbol DUCOMMUN INC /DE/ [ DCO ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
USWald Sit	<u>epiien G</u>			X Director 10% Owner					
			_	Officer (give title Other (specify					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	below) below)					
200 SANDPOINTE AVENUE		E	02/21/2020	Chairman, President & CEO					
SUITE 700									
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable					
(Street)				Line)					
SANTA ANA	A CA	92707-5759		X Form filed by One Reporting Person					
			_	Form filed by More than One Reporting Person					
(City)	(State)	(Zip)		r eison					

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities A Disposed Of (I			5. Amount of Securities Beneficially Owned Following Reported	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)		(1130.4)
Common Stock	02/21/2020		A		40,969(1)	Α	<b>\$0.00</b> <sup>(2)</sup>	148,721 <sup>(3)</sup>	D	
Common Stock	02/21/2020		F		21 <b>,</b> 571 <sup>(4)</sup>	D	\$56.95	127,150	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Date Amount of		8. Price of Derivative Security (Instr. 5) 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

#### Explanation of Responses:

1. Acquired upon the settlement of performance stock units granted on March 20, 2017 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. The total amount of securities listed includes 273 shares of common stock acquired on January 31, 2020 through the Ducommun Incorporated Employee Stock Purchase Plan.

4. Represents a reduction in shares to satisfy the tax withholding obligations of the Issuer with respect to the settlement, on February 21, 2020, of 40,969 performance stock units, as described in footnote (1) above.

#### **Remarks:**

Stephen G. Oswald

<u>02/25/2020</u>

\*\* Signature of Reporting Person

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.

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