## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* REARDON ANTHONY J   |   |  |   |                             |   | 2. Issuer Name <b>and</b> Ticker or Trading Symbol DUCOMMUN INC /DE/ [ DCO ] |       |  |  |       |                    |   |                 |                      | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |                                    |   |   |   |  |  |
|--|---|--|---|-----------------------------|---|--|-------|--|--|-------|--------------------|---|-----------------|----------------------|---|------------------------------------|---|---|---|--|--|
| REARDON ANTHON 1 J   |   |  |   |                             |   |  |       |  |  |       |                    |   |                 |                      | X   | Direc                              | ctor  | 1   | 0% O  | wner   |  |
| (Last) (First) (Middle)  |   |  |   | 3. D                        | Date of Earliest Transaction (Month/Day/Year) |  |       |  |  |       |                    |   |                 | X                    | Offic<br>belov  | er (give title<br>w)               |   | ther (<br>elow)   | specify   |  |  |
| DUCOMMUN INCORPORATED  |   |  |   |                             |   | 06/22/2012   |       |  |  |       |                    |   |                 |                      |   |                                    | Presiden  | t and CEO   | )   |  |  |
| 23301 WILMINGTON AVE.  |   |  |   |                             |   |  |       |  |  |       |                    |   |                 |                      |   |                                    |   |   |   |  |  |
| (Street)   |   |  |   |                             |   | 4. If Amendment, Date of Original Filed (Month/Day/Year)                     |       |  |  |       |                    |   |                 |                      | Individual or Joint/Group Filing (Check Applicable Line)                |                                    |   |   |   |  |  |
|  | CARSON CA 90745   |  |   |                             |   |  |       |  |  |       |                    |   |                 |                      | X   | Form filed by One Reporting Person |   |   |   |  |  |
| (City) (State) (Zip)   |   |  |   |                             |   |  |       |  |  |       |                    |   |                 |                      | Form filed by More than One Reporting<br>Person                         |                                    |   |   |   |  |  |
| (City)   | (51   | ate) (                                     | Σιρ)  |                             |   |  |       |  |  |       |                    |   |                 |                      |   |                                    |   |   |   |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |   |  |   |                             |   |  |       |  |  |       |                    |   |                 |                      |   |                                    |   |   |   |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)  |   |  |   |                             |   | Execution Date,  |       |  | 3. Transaction Code (Instr. 8)  4. Securities Act Disposed Of (D) 5) |       |                    |   |                 |                      | 5. Amount of Securities Beneficially Owned Following Reported           |                                    | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)                               |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|  |   |  |   |                             |   |  |       |  | Code   | v     | Amount             |   | (A) or<br>(D)   | Price                |   | Transa                             | action(s)<br>3 and 4)   |   |   | (111511.4)   |  |
| Common Stock 06/22/  |   |  |   |                             |   | 2/2012   |       |  |  |       | 6,000              |   | A               | \$7.951              |   | 60,580                             |   | 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) | 3A. Deeme<br>Execution<br>if any<br>(Month/Da | Date, Transaction Code (Ins |   |  | on of |  | 6. Date E<br>Expiratio<br>(Month/D                                   | n Dat |                    | d 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |                 |                      | 8. Price of Derivative Security (Instr. 5)                              |                                    | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | (D)<br>rect   | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |   |  |   |                             | Code  | v  | (A)   |  | Date<br>Exercisa   |       | Expiration<br>Date | Titl  | or<br>Nui<br>of | ount<br>mber<br>ares |   |                                    |   |   |   |  |  |

**Explanation of Responses:** 

/s/ Anthony J. Reardon

06/22/2012

\*\* 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.