FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	DVAL				
	OMB Number:	3235-0287				
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	Check this box if no longer subject to
\neg	Section 16. Form 4 or Form 5
J	obligations may continue. See
	Instruction 1(h)

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* <u>Groves Douglas L</u>						2. Issuer Name and Ticker or Trading Symbol DUCOMMUN INC /DE/ [DCO]									Check	ationship of Report (all applicable) Director Officer (give title		10%		Ssuer Owner (specify
(Last) (First) (Middle) DUCOMMUN INCORPORATED 23301 WILMINGTON AVE.						3. Date of Earliest Transaction (Month/Day/Year) 03/18/2015									X	belov				
(Street) CARSON CA 90745-6209 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										Indiv ne) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - Nor	n-Deriva	ative	Se	curitie	s Acc	uired,	Dis	posed o	f, oı	Ben	eficia	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Da			n Date,	Code (Instr.							Securities Beneficially		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)				(1130.1.4)
Common Stock 03/18/									F		572		D	\$25	.18	6,305		D		
		Та	ıble II - C								sed of, onvertib				y Ov	vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, Transaction Code (Ins					6. Date E Expiratio (Month/D		Amount of Securities Underlying Derivative Security (Instr. and 4)				vative derivatirity Security r. 5) Benefic Owned Following Reporte	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form: Direct or Indi (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisal		Expiration Date	Title	or Nui of	ount nber ıres						

Explanation of Responses:

/s/ Douglas L. Groves

03/20/2015

** Signature of Reporting Person

Date

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

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$

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.

 $^{^{\}star}$ 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).