

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

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Expires: January 31, 2008 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1 Name and Add	drace of R	onorti	na Parson	* 2	2. Issi	uer Nam	e and	Ti	icker o	r Tr	ading	Svr	nbol	5. Relatio	nship of l	Reporting	Person(s)	to Issuer
1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Kozinski Alle	en				CUF	RTISS	WRI	G	нт (COI	RP [CV	V]					
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)								X Director 10% Owner					
, ,	, ,													Office below)	er (give title	below) _	Other	(specify
C/O CURTISS-WRIGHT					1/3/2008								below)					
CORPORAT	ION, 4	BEC	KER															
FARM ROAL	D, 3RD	FLO	OR															
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)					
ROSELAND	, NJ 070	68												W F	"1 11 O	n : n		
(City) (State) (Zip)												_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person						
						~												
		Tab	ole I - Noi	_				_	î 				í –	Beneficiall	•		r	1
1.Title of Security (Instr. 3)				2. Tra Date	I		3. Trans. Code (Instr. 8)		4. Securities A (A) or Dispos (Instr. 3, 4 and		sed of (D) Follow		nount of Securities Beneficially Owned wing Reported Transaction(s) . 3 and 4)			Ownership Form:	Beneficial	
						Date, if Inny				(A) or							or Indirect (I) (Instr.	Ownership (Instr. 4)
				1/2/2	000		Code	V	Amount	(D)	Pr	rice					4)	
Common Stock				1/3/2	P (1) 175 A \$50.07 (2) 2645					D								
				•														,
	ole II - De	rivati									1			ts, options				,
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Deemed Execution	4. Trans. Code (Instr. 8)	5. Number of Derivative Securities) Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		and Expiration Date Se				Secu Deriv	7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4)		ying	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. n 4)	Beneficial
				Code V	(A)	(D)	Date Expiration Exercisable Date			Title Amount or Nu Shares		Number of		Transaction (s) (Instr. 4)				

Explanation of Responses:

- (1) Shares were acquired under the Corporation's 2005 Stock Plan for Non-employee Directors whereby non-employee directors may elect to receive their quarterly retainer and meeting fees in the form of Common Stock
- (2) Price is based on the average of the high and low market price for the securities on the New York Stock Exchange on December 31, 2007, the date the fees were earned.

Reporting Owners

Panarting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Kozinski Allen C/O CURTISS-WRIGHT CORPORATION	X						
4 BECKER FARM ROAD, 3RD FLOOR ROSELAND, NJ 07068							

Signatures

Paul J. Ferdenzi through Power of Attorney for Allen Kozinski

1/3/2008

** 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 control number.