FORM 4

[] 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 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 or Section 30(h) of the Investment Company Act of 1940

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)					
Quinly Tom P	CURTISS WRIGHT CORP [CW]	(Check an applicable)					
(Last) (First) (Middle)	3. Date of Earliest Transaction (MM/DD/YYYY)	Director 10% Owner					
C/O CURTISS-WRIGHT	12/17/2014	X Officer (give title below) Other (specify below) Vice President					
CORPORATION, 10							
WATERVIEW BOULEVARD							
(Street)	4. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)					
PARSIPPANY, NJ 07054							
(City) (State) (Zip)		X Form filed by One Reporting Person Form filed by More than One Reporting Person					

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

1.Title of Security	2. Trans.	2A.	3. Trans.		4. Securities	5. Amount of Securities Beneficially Owned	6.	7. Nature
(Instr. 3)	Date	Deemed	Code		Acquired (A) or	Following Reported Transaction(s)	Ownership	of Indirect
		Execution	(Instr. 8)		Disposed of (D)	(Instr. 3 and 4)	Form:	Beneficial
		Date, if		(Instr. 3, 4 a)			Direct (D)	Ownership
		any			(A)	7	or Indirect	(Instr. 4)
					or		(I) (Instr.	
			Code	v	Amount (D) Price		4)	
				·		-		

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

					_		-			I					
 Title of Derivate 	2.	Trans.	3A.	4.		5. Number of	of	6. Date Exe	rcisable and	7. Title an	d Amount of	8. Price of	Number	10.	11. Nature
Security	Conversion	Date	Deemed	Trans		Derivative		Expiration I	Date	Securities	Underlying	Derivative	of	Ownership	of Indirect
(Instr. 3)	or Exercise		Execution	Code		Securities		Î Î		Derivative	Security	Security	derivative	Form of	Beneficial
	Price of		Date, if	(Instr.		Acquired (A) or			(Instr. 3 ar	nd 4)	(Instr. 5)	Securities	Derivative	Ownership
	Derivative		any	8)		Disposed of	(D)			<u> </u>		· · · ·	Beneficially	Security:	(Instr. 4)
	Security		-	Ĺ,									Owned	Direct (D)	· · · · ·
						(Instr. 3, 4 a	nd						Following	or Indirect	
						5)							Reported	(I) (Instr.	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction (s) (Instr. 4)	4)	
Restricted Stock Unit	\$0 (1)	12/17/2014		A		5101 ⁽²⁾		11/11/2017 (3)	11/11/2017	Common Stock	5101	\$0 (1)	44291.82	D	

Explanation of Responses:

- (1) No price on the date of issue, option having been granted as an employee benefit transaction.
- (2) Number of shares calculated based on the value of the award divided by the closing price of \$70.58 for Issuer's common stock as reported by the New York Stock Exchange on November 11, 2014, the date the Board initially approved the award.
- (3) These units are restricted for a period of three years and are subject to forfeiture if the Officer should leave the employ of the Company.

Reporting Owners

Penerting Owner Neme / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Quinly Tom P C/O CURTISS-WRIGHT CORPORATION 10 WATERVIEW BOULEVARD PARSIPPANY, NJ 07054			Vice President	;					

** 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).

12/17/2014 Date

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.