

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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# INITIAL STATEMENT OF 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 <sup>*</sup><br>MINOR GLENDA J                   |                     | of Event Ro<br>nt (MM/DI<br>5/16/20  | D/YYY      | Y)   | 3. Issuer Name and Ticker or Trading Symbol<br>CURTISS WRIGHT CORP [CW] |   |   |  |  |
|--|---------------------|--|------------|--|---|---|---|--|--|
| (Last) (First) (Middle)<br>C/O CURTISS-WRIGHT<br>CORPORATION, 130 HARBOUR<br>PLACE DRIVE | _ <b>X</b> _D       |  | •          | ng Person(s) to Issuer (<br>10% Owner<br>Other (specify              |   | able)                                       |   |  |  |
| (Street)<br>DAVIDSON, NC 28036<br>(City) (State) (Zip)                                   |                     | 5. If Amendment, Date<br>Original Filed (MM/DD/YYYY)<br><b>6.</b> Individual or Joint/Group Filing (Check Applicable Line)<br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b><br><b></b> |            |  |   |   | Line)   |  |  |
|  | Tabl                | e I - Non-I  | Derivat    | tive Securities Benefic  | ially Owned   |   |   |  |  |
| 1.Title of Security<br>(Instr. 4)  | Ве                  |  | ally Owned | 3. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I)<br>(Instr. 5) | 4. Nature of Indirect Beneficial Ownership<br>(Instr. 5)                |   |   |  |  |
| Table II - Derivative  | Securities l        | Beneficially   | y Own      | ed ( <i>e.g.</i> , puts, calls, w                                    | arrants, option   | s, convertible sec                          | urities)  |  |  |
| · · · · · · · · · · · · · · · · · · ·  |                     | piration Date Secu   |            | tle and Amount of<br>rities Underlying<br>vative Security<br>(- 4)   | 4. Conversion<br>or Exercise<br>Price of<br>Derivative                  | Form of<br>Derivative<br>Security:          | 6. Nature of Indirect<br>Beneficial Ownership<br>(Instr. 5) |  |  |
|  | Date<br>Exercisable | -  | n Title    | Amount or Number of<br>Shares  | Security  | Direct (D) or<br>Indirect (I)<br>(Instr. 5) |   |  |  |

### **Explanation of Responses:**

No securities are beneficially owned.

### **Reporting Owners**

| Reporting Owner Name / Address  | Relationships |           |         |       |  |
|---|---------------|-----------|---------|-------|--|
| Reporting Owner Name / Address  | Director      | 10% Owner | Officer | Other |  |
| MINOR GLENDA J<br>C/O CURTISS-WRIGHT CORPORATION<br>130 HARBOUR PLACE DRIVE<br>DAVIDSON, NC 28036 | X             |           |         |       |  |

### Signatures

Paul J. Ferdenzi by Power of Attorney for Glenda J. Minor

5/17/2019

\*\* 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 5(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.