

[] 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

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## 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

				*	2	т	N.T.	1 T	1	Tr 1		1 1		5 D 1 ( 1 1	CD	1. D	/ \	
. Name and Address of Reporting Person *				2.	2. Issuer Name <b>and</b> Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
						TID	DICC I	w	***	COD	D I CX	<b>x</b> 71		(Cneck all app	oncable)			
Adams Davi	d Charle	es			C	UKI	1155 \	VKIG	HI	COR	PICV	<b>v</b> j				100		
(Last)	(Firs	t) (M	Iiddle)		3.	3. Date of Earliest Transaction (MM/DD/YYYY)								X_ Director10% Owner				
														X_ Officer (gi		v)Otl	ner (specify l	below)
C/O CURTI	SS-WRI	GHT						12	2/7	/2021				Executive Ch	airman			
CORPORA			BOI	IR														
PLACE DRI		, , , , , , , , , , , , , , , , , , , ,	<b>D</b> 0 0															
22.102.210	(Str	eet)			4.	If An	nendme	nt. Date	Or	iginal Fil	ed (MM/	DD/YY	YY)	6. Individual o	or Joint/G	roup Filing	Check Appl	icable Line)
								.,		<i>S</i>			,			- T		,
DAVIDSON	, NC 280	36												X Form filed b				
(0	City) (St	ate) (Z	ip)											Form filed by	More than C	One Reporting P	erson	
			Tab	le I - No	on-De	rivati	ive Seci	irities A	Lcq	uired, D	isposed	of, or	Bei	neficially Own	ed			
1.Title of Security				2. Trans.	Date 2	2A. Dee	emed 3.	Trans. Co	ode	4. Securi	ties Acqui	red (A)	or	5. Amount of Secur			6.	7. Nature
(Instr. 3)						Execution Date, if		nstr. 8)		Disposed (Instr. 3,				Following Reported (Instr. 3 and 4)	d Transaction	n(s)	Ownership Form:	of Indirect Beneficial
					ľ	Date, II	any		1	(IIISII. 3,	4 and 3)			(Instr. 3 and 4)			Direct (D)	Ownership
											(A) or						or Indirect (I) (Instr.	(Instr. 4)
								Code	V	Amount	(A) 61 (D)	Price	;				(1) (IIISII. 4)	
Common Stock				12/7/20	021			S		10488	D s	133.187	4 (1)		50752		D	
							•							•				•
	Tal	ble II - De	rivati	ve Secu	ırities	Bene	eficially	Owned	l (e.	<i>g</i> ., puts,	calls, v	varrar	ıts,	options, convei	rtible secu	ırities)		
1. Title of Derivate	2.	3. Trans.			1. Trans					6. Date Exe						9. Number of	10.	11. Nature
Security (Instr. 3)	Conversion or Exercise	Date	Execu	ition (	Instr. 8	)		e Securiti	es I	Expiration I	Date					derivative Securities	Ownership Form of	11. Nature of Indirect Beneficial
(IIISII. 3)	Price of		Date,	ii aiiy		Disposed of (D) (Instr. 3 and 4) (Instr. 5) E (Instr. 3, 4 and 5)		Beneficially		Ownership								
	Derivative							. 3, 4 and 5)					,			Owned	Security:	(Instr. 4)
	Security								I	Date	Expiration	n	Am	ount or Number of		Following Reported	Direct (D) or Indirect	
					Code	v	(A)	(D)		Exercisable		Title	Sha			Transaction(s) (Instr. 4)	(I) (Instr. 4)	
	1		1		Code	V	(A)	(D)			<u> </u>		<u> </u>			(111811.4)	4)	

#### **Explanation of Responses:**

(1) Price is based on the average sales price of shares sold throughout the day.

#### Reporting Owners

Reporting Owners								
Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Adams David Charles								
C/O CURTISS-WRIGHT CORPORATION	X		 Executive Chairman					
130 HARBOUR PLACE DRIVE	Λ		Executive Chairman					
DAVIDSON, NC 28036								

### **Signatures**

Paul J. Ferdenzi by Power of Attorney for David Adams

\*\*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.