FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	205/19
wasiiiiiqtoii,	D.C.	20349

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APPROVAL

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

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* REARDON ANTHONY J						2. Issuer Name and Ticker or Trading Symbol DUCOMMUN INC /DE/ [DCO]									neck all a		•	Person(s) to Issuer 10% Owner		
(Last)	IDPOIN'	(First	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/22/2017									Offi bel	cer (give title ow)	Other (specify below)		
#700						4. If	If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					pplicable	
(Street) SANTA	ANA	CA	9	2707		-									X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)		(State	e) (2	Zip)																
			Tabl	e I - No	on-Deriv	ative/	Sec	curitie	s Ac	quired	l, Di	sposed o	f, or	Bene	ficia	lly Owr	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Execution Date,		3. 4. Securities Acquired (A) o Transaction Code (Instr. 3, 4 a 8)				5) Secu Bene	nount of irities eficially ed Following	Form: Dir (D) or Ind	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	(A) or (D) Pric		ice	Tran	saction(s) r. 3 and 4)			(Instr. 4)		
Common Stock 09/22/2					2017	017		S		3,167	D \$31		31.08	3(1)	92,555					
Common Stock 09/22/2				2017	.017		S		1,031 D \$30		30.87	7(2)	91,524							
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	erivative conversion or Exercise (Month/Day/Year) str. 3) Price of Derivative Security Execution Date, if any (Month/Day/Year) (Month/Day/Year)		4. Transa Code (8)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date		Amount of Securities Underlying Derivative Security (Instr. and 4)		unt	8. Price of Derivative Security (Instr. 5)		Owne Form: Direct or Ind (I) (Ins	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$30.95 to \$31.24, inclusive. The reporting person undertakes to provide Ducommun Incorporated, any security holder of Ducommun Incorporated or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in footnote (1) to this Form.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$30.61 to \$31.15, inclusive. The reporting person undertakes to provide Ducommun Incorporated, any security holder of Ducommun Incorporated or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in footnote (2) to this Form.

Remarks:

Anthony J. Reardon

** Signature of Reporting Person Date

09/26/2017

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 Number.