

[] 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 *					Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
TYNAN GL	ENN E				CU	RTIS	S WRIG	HT	COR	P [C	W]		,			
(Last) (First) (Middle) C/O CURTISS-WRIGHT				3. Date of Earliest Transaction (MM/DD/YYYY) 5/12/2016							Director 10% Owner X Officer (give title below) Other (specific contents) Vice President and CFO			Other (speci	ify below)	
CORPORA' BOULEVAI	TION, 10		RVIE	W												
	(Str	eet)			4. If	Amend	ment, Date	Orig	ginal F	iled (MM	I/DD/YYYY)	6. Individua	l or Joint/C	roup Filing	(Check App	licable Lir
PARSIPPANY, NJ 07054 (City) (State) (Zip)											_ X _ Form filed by One Reporting Person _ Form filed by More than One Reporting Person					
	,			- Non-I)eriv	vative S	Securities A	can	ired T	Disnosee	d of or Re	eneficially Ow	ned			
1.Title of Security (Instr. 3)				2. Trans. Date			3. Trans. Code (Instr. 8)		4. Securities Acquir Disposed of (D) (Instr. 3, 4 and 5)		quired (A) or		urities Beneficially Owned		6. Ownership Form: Direct (D)	Beneficia Ownersh
							Code		Amour	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(111501.4)
Common Stock			5/	/12/2016	+		M (1)	V	10246	A	\$54.00 (2)	78171			D	
Common Stock 5/12			/12/2016			S (3)		10246	D	\$81.15 (4)		67925	67925			
	Tab	le II - Deri	ivative S	Securitio	es Bo	eneficia	lly Owned	(e.g	z., put	s, calls,	warrants	, options, conv	vertible sec	curities)		
1. Title of Derivate Security (Instr. 3)	Conversion Date		3A. Deen Execution Date, if an	n Code	Deri Secu (A) (D)		mber of rative rities Acquired r Disposed of (3, 4 and 5)		Expiration Date S			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following	10. Ownership Form of Derivative Security: Direct (D)	11. Natur of Indirect Beneficia Ownersh (Instr. 4)
				Coc	le	V (A)	(D)	Dat Exe	te ercisable	Expiratio Date	Title	Amount or Number of Shares		Reported Transaction(s (Instr. 4)	or Indirect (I) (Instr. 4)	
Option to Purchase Common Stock	\$54.00	5/12/2016		М			10246	11/	16/2008	11/17/20	17 Commo Stock	n 10246	\$0 (<u>5</u>)	85103	D	
Explanation of	Responses	s :														
(These share	es were acqu	uired throug	gh an ex	ercise of	f a st	tock opt	ion award g	rant	ed und	er the C	Company's	2005 Long Te	rm Incentiv	e Plan.		
(Reporting p	erson recei	ved an awa	rd for 10	0246 sha	ares i	in 2007	at a strike p	rice	of \$54	.00.						
		-								-		e may sell shar 00% of his requ		-		es to
(Weighted a	verage selli	ng price of	shares s	sold on N	May	12, 201	6.									
No price on	the date of	issue havii	ng been	granted	as aı	n emplo	yee benefit	tran	saction	١.						
Reporting Own	iers															

Relationships

Vice President and CFO

Other

Director 10% Owner Officer

Signatures

Reporting Owner Name / Address

10 WATERVIEW BOULEVARD PARSIPPANY, NJ 07054

C/O CURTISS-WRIGHT CORPORATION

TYNAN GLENN E

Paul J	. Ferder	ızi bv	Power	of Attorney	for	Glenn	E. T	vnar

5/13/2016

** 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.