

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

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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

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)				
Ogilby Gary A	CURTISS WRIGHT CORP [CW]					
(Last) (First) (Middle)	3. Date of Earliest Transaction (MM/DD/YYYY)	Director 10% Owner _X Officer (give title below) Other (specify below)				
130 HARBOUR PLACE DRIVE	3/14/2024	VP & Corporate Controller				
(Street)	4. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)				
DAVIDSON, NC 28036		X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)		I offit field by More than one Reporting Person				

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

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

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

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1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative			Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		Securities Underlying Derivative Security		Derivative Security (Instr. 5)	Securities Beneficially Owned	Ownership Form of Derivative Security:	Beneficial Ownership (Instr. 4)
	Security			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Restricted Stock Unit	\$0 (1)	3/14/2024 <mark>(2)</mark>		А		294 ⁽³⁾		3/14/2024	3/15/2026	Common Stock	294	\$240.97 ⁽⁴⁾	5,209	D	

Explanation of Responses:

- (1) No price on the date of issue, option having been granted as an employee benefit transaction.
- (2) This is the date the Executive Compensation Committee of the Board of Directors approved the award.
- (3) Number of shares is calculated by taking the amount of the Reporting Person's award and dividing that amount by the closing price of the Registrant's common stock on the date such award was earned.
- (4) Price is based on the close price for the Registrant's common stock on March 14, 2024, the date the Executive Compensation Committee of the Board of Directors approved the awards.

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Ogilby Gary A 130 HARBOUR PLACE DRIVE DAVIDSON NC 28036			VP & Corporate Controller				
DAVIDSON, NC 28036							

Signatures

Paul J. Ferdenzi by Power of Attorney from Gary A. Ogilby

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.