FORM 4

☐ 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

☐ 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 *														5. Relationship of Reporting Person(s) to Issuer					
						CURTISS WRIGHT CORP [CW]								(Check all applicable)					
Freda Robert F															Director		10%	Owner	
(Last) (First) (Middle)					3.	3. Date of Earliest Transaction (MM/DD/YYYY)									X Officer (give title below) Other (specify below)				
															Vice President and Treasurer				
C/O CURTISS-WRIGHT						1/4/2024									vice i residen	t and III	asurci		
CORPORAT	TON, 130) HARB	OUI	R															
PLACE DRI	VE																		
(Street)						4. If Amendment, Date Original Filed (MM/DD/YYYY)								Y)	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						
(C	ity) (Stat	te) (Zip	p)												roilli filed by	Wiore than C	one Reporting 1	CISOII	
			T 11	T N	ъ	. ,.		.,. ,					c r		e : 11 O	1			
															ficially Owne			1	
1.Title of Security (Instr. 3) 2. Trans. Dat					2A. De Executi Date, if	on (I	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			F	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
																		or Indirect	
								Code	V	Amoun	(A) (D)		Price					(I) (Instr. 4)	
Common Stock 1/4/2024				024			P ⁽¹⁾		49	A	\$18	89.3205	<u>(2)</u>			3,382	D		
					ı					ı									
	Tabl	le II - Der	ivativ	e Secu	ırities	Bene	ficially	Owned	l (e.	g., puts	, call	s, wa	rrant	s, op	otions, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Do Execut Date, i	tion	4. Trans. Cod Instr. 8)		Derivativ Acquired Disposed			6. Date Exercisable and Expiration Date			7. Title and Securities Derivative (Instr. 3 an		Inderlying Security	Derivative Security	9. Number of derivative Securities Beneficially Owned	Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Co	Code	V	(A)	(D)	١,	Date Exercisabl		iration		Amou Share	unt or Number of		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

- (1) Shares were purchased pursuant to the Company's 2018 Employee Stock Purchase Plan, under which Participant agrees to payroll deductions prior to the commencement of a six month offering period whereby the payroll deductions are accumulated for the purchase of shares at the end of the offering period
- (2) The purchase price is calculated by giving a 15% discount on the average selling price of the Company's common stock price on December 31, 2023 the last day of the offering period.

Reporting Owners

Reporting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Freda Robert F									
C/O CURTISS-WRIGHT CORPORATION			Vice President and Treasurer						
130 HARBOUR PLACE DRIVE		vice Fresident and 11							
DAVIDSON, NC 28036									

Signatures

Paul J. Ferdenzi by Power of Attorney from Robert Freda

1/5/2024

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.