Edgar Filing: ASTRO MED INC /NEW/ - Form 4

	D INC /NEW/										
Form 4 March 16, 20	016										
FORM										APPROVAL	
	UNITED	STATES		RITIES A shington			ANGE (COMMISSION	OMB Number:	3235-0287	
Check th if no long	aar								Expires:	January 31, 2005	
subject to Section 16. Form 4 or			F CHAN	NGES IN SECUI		'ICIA	AL OW	NERSHIP OF	burden ho	Estimated average burden hours per response 0.	
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17(a) of the 1	Public U		ding Co	mpan	iy Act o	ge Act of 1934, f 1935 or Sectic 40			
(Print or Type]	Responses)										
			2. Issuer Name and Ticker or Trading Symbol ASTRO MED INC /NEW/ [ALOT]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	Middle)	3. Date o	f Earliest T	ransaction			(Check all applicable)				
(Last) (First) (Middle) 50 EDGEWATER ROAD			(Month/Day/Year) 03/14/2016					Director 10% Owner N Officer (give title Other (specify below) below) below) Vice President and CTO			
	(Street)		4. If Ame	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
NADDACA	ANSETT, RI 0288	n	Filed(Mo	nth/Day/Yea	r)			Applicable Line) _X_ Form filed by Form filed by I			
NAKKAUP	$\mathbf{MSETT}, \mathbf{M}0200$	52						Person			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities Aco	quired, Disposed o	f, or Benefici	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2. Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year)		Code (Instr. 3, 4 and 5)				Beneficially Owned Following Reported Transaction(s)	6.7. Nature ofOwnershipIndirectForm:BeneficialDirect (D)Ownershipor Indirect(Instr. 4)(I)(Instr. 4)		
C				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	03/14/2016			A <u>(1)</u>	768	А	\$0	13,944 <u>(2)</u>	D		
Common Stock	03/14/2016			F	306	D	\$ 15.01	13,638	D		
Common Stock								582	I	Held in Employee Stock Ownership Plan	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. 6. Date Exercisable nNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price o Derivativ Security (Instr. 5)
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Unit	<u>(3)</u>	03/14/2016		А	48	(4)	(4)	Common Stock	48	\$ 0

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Natalizia Michael J 50 EDGEWATER ROAD NARRAGANSETT, RI 02882			Vice President and CTO					
Signatures								
/s/ Margarat V Boarieka by p	wor of							

/s/ Margaret V. Boericke, by power of attorney

**Signature of Reporting Person

03/16/2016

Date

Explanation of Responses:

- * 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).
- (1) Shares issued in settlement of performance based stock units earned on March 14, 2016. Shares are fully vested when earned.
- (2) Includes 695 shares acquired under the Astro-Med, Inc. Employee Stock Purchase Plan in January 2016.
- (3) Each restricted stock unit represents a contingent right to receive one share of ALOT common stock.
- (4) The restricted stock units vest in three equal annual installments beginning March 14, 2017.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners