

[] 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

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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 * PETRARCA STEPHEN M						2. Issuer Name and Ticker or Trading Symbol ASTRO MED INC /NEW/ [ALOT]								5. Relationship of Reporting Person(s) to Issuer					
														Check all app	olicable)				
(Last) (First) (Middle)						3. Date of Earliest Transaction (MM/DD/YYYY)								Director 10% Owner X Officer (give title below) Other (specify below) Vice President					
C/O ASTRO-MED, INC., 600 E GREENWICH AVENUE						5/20/2015							V	ice Presider	ıt				
(Street)						4. If Amendment, Date Original Filed (MM/DD/YYYY)								Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)	
W WARWICK, RI 02893 (City) (State) (Zip)						5/22/2015							_ 2	_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person					
()	city) (Sta	ate)	(Zip)										ļ						
			Tabl	e I - N	on-De	rivat	ive Secu	ırities A	cquir	ed, D	isposed (of, or B	enefi	icially Own	ed				
1.Title of Security (Instr. 3)				2. Tra	ns. Date	2A. Deemed Execution Date, if any		3. Trans. C (Instr. 8)	Code	or Di	curities Acq sposed of (I . 3, 4 and 5)	0)	Follo	5. Amount of Securities Be Following Reported Transa Instr. 3 and 4)			6. Ownership Form:	Beneficial	
								Code	v	Amo	(A) o	r Price					Direct (D) or Indirect (I) (Instr.	Ownership (Instr. 4)	
	Т-1-	LILD		C	:4:	D	. C: . : . 11		<u> </u>	1				··	-41-1		7)	l .	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. I Exec	Deemed ution , if any		8) 5. Numb Derivati Securiti (A) or E (D)		er of	6. Date Exercisable and Expiration Date		7. Title at	and Ames Under	Jnderlying Derivati Security Security		of 9. Number of	10. Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	V	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	N	mount or lumber of hares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)		
Restricted Stock Units	<u>(1)</u>	5/20/201	15		A		4609	2)		(3)	<u>(3)</u>	Commo Stock		4609	\$0.00	4609	D		
`	Iment is being vative secure other restricted stock unders	nit repre ng filed ities in T cted stoo its vest i	solely to Γable I, ck unit a	o reflect as was wards. qual ar	t the retimely	report reponstall	ing person orted on diments be	on's acquithe reported the repo	isitio ting p	n of 4 person	,609 rest n's origina	ricted st		units as deriv he original F					
600 E GREENWICH AVENUE		ENUE			'	Vice 1	Presider	ıt											

Signatures

W WARWICK, RI 02893

/s/ Margaret Boericke, by power of attorney

**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.