

[] 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 *					2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
PETRARCA	STEPH	HEN M		,	AST	RO M	ED INC	N	EW/		T]		(· · · · · · · · · · · · · · · · · · ·					
(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					5/20/2016								vice i residei					
GREENWIC																		
	(Str	reet)		4	4. If <i>A</i>	Amendm	ent, Date (Origi	nal Fi	led (MM	DD/YYY	Y)	6. Individual o	or Joint/G	roup Filing	(Check App	olicable Line)	
W WARWI	CK RI	12893											V Form filed b	v One Peno	rting Person			
(City) (State) (Zip)					1								X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
(C	ity) (5	tate) (Zi	Ρ)															
			Table l	I - Non-E)eriva	tive Sec	curities Ac	cquii	red, D	isposed	of, or l	Bene	eficially Owne	ed				
1.Title of Security (Instr. 3) 2. Trans			2	. Trans. Dat			3. Trans. Co	ode	4. Securities Acquired (A) 5.			5. A	5. Amount of Securities Beneficially Owned			6.	7. Nature	
					cution e, if any	(Instr. 8)			or Disposed of (D) (Instr. 3, 4 and 5)			lowing Reported Transaction(s) str. 3 and 4)		s)	Ownership Form:	Beneficial		
												1	ŕ			Direct (D) or Indirect	Ownership	
										(A) or						(I) (Instr.	(111811.4)	
				= 100 1001 <	-		Code	V	Amou	- ` ′	Price			****		4)		
Common Stock Common Stock				5/20/2016 5/20/2016			M F		1152 374	A D	\$0.00 \$14.73			2998 2624		D D		
Common Stock				3/20/2010	-		Г		3/4	В	\$14.73	-	1	2024		D	Held in	
																	Employee	
Common Stock												3571				Stock Ownership		
																	Plan	
	Tal	ble II - Deri	ivative :	Securitie	es Ber	eficially	y Owned ((<i>e.g.</i>	, put	s, calls,	warran	ts, o	ptions, conve	rtible sec	urities)		_	
Title of Derivate Security	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Dee Execution	emed 4. Tra			. Number of Derivative		6. Date Exercisable and 7 Expiration Date S						Number of derivative	10. Ownership	11. Nature of Indirect	
(Instr. 3)			Date, if			Securiti	es Acquired	LAPI	Expiration Bute			ive S	Security Security (Instr. 5)	Securities Beneficially Owned	Form of	Beneficial		
						(A) or I (D)	Disposed of				(Instr. 3 and				Derivative Security:	Ownership (Instr. 4)		
						(Instr. 3	, 4 and 5)			ı			1		Following Reported	Direct (D) or Indirect		
								Date		Expiration	Title		Amount or Number of		Transaction(s)	(I) (Instr.		
				Coo	ie V	(A)	(D)	Exer	cisable	Date	1		Shares		(Instr. 4)	4)		
Restricted Stock Unit	<u>(1)</u>	5/20/2016		М			1152		<u>(2)</u>	<u>(2)</u>	Comn Stock		1152	\$0.00	3457	D		

Explanation of Responses:

- (1) Each restricted stock unit represents a contingent right to receive one share of ALOT common stock.
- (2) The remaining restricted stock units vest in three equal annual installments beginning on May 20, 2017.

Reporting Owners

Keporting Owners								
Panorting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	ationships ner Officer Vice Presiden	Other				
PETRARCA STEPHEN M								
C/O ASTRO-MED, INC.			Vice Duesident					
600 E GREENWICH AVENUE			vice President					
W WARWICK, RI 02893								

Signatures

/s/ Margaret V. 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.