ASTRO MED INC /NEW/

Form 4

subject to

Section 16.

Form 4 or

obligations

may continue.

Form 5

| November 13, 201 | 4 |
|------------------|-------------------------------------------------------------------------|
| FORM 4 | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Weshington, D.C. 20540 |
| | Washington, D.C. 20549 |
| Check this box | 0 / |
| if no longer | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF |

Symbol

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per 0.5 response...

5. Relationship of Reporting Person(s) to

Issuer

317

I

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 See Instruction

2. Issuer Name and Ticker or Trading

SECURITIES

1(b).

(Print or Type Responses)

Estate of Albert W. Ondis

1. Name and Address of Reporting Person *

| | | | ASTRO MED INC /NEW/ [ALOT] | | (Cl | neck all applical | hle) | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|---------------------|-------------------------------------------------------------|----------------------------------------|----------------------------------|----------------------------|---------------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| (Last) 600 EAST AVENUE, | (First) GREENWICH | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 11/12/2014 | | | Director Officer (gibelow) | _X_ 1 | 0% Owner other (specify | | |
| (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) Applicable Line) Form filed by One Reporting Person WEST WARWICK, RI 02893 4. If Amendment, Date Original Filed(Month/Day/Year) Applicable Line) | | | | Person Reporting | | | | | | |
| (City) | (State) | (Zip) | Tabl | le I - Non-l | Derivative | Secur | rities Ac | quired, Disposed | of, or Benefic | ially Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction D (Month/Day/Yea | ar) Executio any | ned n Date, if Day/Year) | 3. Transactic Code (Instr. 8) | on(A) or Di (D) (Instr. 3, | ispose 4 and (A) or | d of 5) Price | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock | 11/12/2014 | | | S <u>(1)</u> | 100 | D | \$ 13.8 | 1,412,525 | D (2) | |
| Common Stock | | | | | | | | 3,858 | I | Held under the issuer's Employee Stock Ownership Plan for the account of Albert W. |

Ondis (3)

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| Common Stock | | | Held under the issuer's Employee Stock Ownership Plan for the account of Albert W. Ondis, III (4) |
|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------|
| Common Stock | 1,658 | I | Held in trust for a child of Albert W. Ondis, III (5) |
| Common Stock | 122,097 | D (6) | |
| Common Stock | 5,614 | I | Held in trust for a child of Alexis Ondis (7) |
| Common Stock | 122,096 | D (8) | |
| Common Stock | 650 | I | Held under the issuer's Employee Stock Ownership Plan for the account of April Ondis |
| Common Stock | 124,475 | D (10) | |
| Reminder: Report on a separate line for each class of securities benefic | Persons who respond to the col information contained in this for required to respond unless the displays a currently valid OMB on number. | m are not orm | SEC 1474 (9-02) |

 $\label{thm:convergence} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. | 6. Date Exercisable and | 7. Title and | 8. Price of | 9. Nu |
|-------------|-------------|---------------------|--------------------|-------------|------------|-------------------------|------------------|-------------|-------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transaction | onNumber | Expiration Date | Amount of | Derivative | Deriv |
| Security | or Exercise | | any | Code | of | (Month/Day/Year) | Underlying | Security | Secui |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivativ | re | Securities | (Instr. 5) | Bene |
| | Derivative | | | | Securities | S | (Instr. 3 and 4) | | Owne |
| | Security | | | | Acquired | | | | Follo |

(A) or Disposed of (D) (Instr. 3, 4, and 5)

Code V (A) (D) Date Expiration Title Amount Exercisable Date or

Number of Shares

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---------------------------------------------------------------------------------------------|---------------|-----------|---------|-------|--|--|--|
| reporting owner runner, runness | Director | 10% Owner | Officer | Other | | | |
| Estate of Albert W. Ondis 600 EAST GREENWICH AVENUE WEST WARWICK, RI 02893 | | X | | | | | |
| Ondis Albert W. III C/O ASTRO-MED, INC. 600 E GREENWICH AVENUE W WARWICK, RI 02893 | | X | | | | | |
| Ondis Alexis C/O ASTRO-MED, INC. 600 EAST GREENWICH AVENUE WEST WARWICK, RI 02893 | | X | | | | | |
| Ondis April C/O ASTRO-MED, INC. 600 E GREENWICH AVENUE W WARWICK, RI 02893 | | X | | | | | |

Signatures

| Margaret D. Farrell (Attorney-in-fact for the Estate of Albert W. Ondis) | 11/13/2014 |
|--------------------------------------------------------------------------|------------|
| **Signature of Reporting Person | Date |
| Margaret D. Farrell (Attorney-in-fact for Albert W. Ondis, III) | 11/13/2014 |
| **Signature of Reporting Person | Date |
| Margaret D. Farrell (Attorney-in-fact for Alexis Ondis) | 11/13/2014 |
| **Signature of Reporting Person | Date |
| Margaret D. Farrell (Attorney-in-fact for April Ondis) | 11/13/2014 |
| **Signature of Reporting Person | 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) The sale was made pursuant to the Rule 10b5-1 Trading Plan of the Estate of Albert W. Ondis.

Reporting Owners 3

Repo Trans (Insti

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- (2) These shares are owned directly by the Estate of Albert W. Ondis and indirectly by Albert W. Ondis, III, Alexis Ondis and April Ondis, as co-executors of the Estate of Albert W. Ondis.
- (3) These shares are owned indirectly by the Estate of Albert W. Ondis and each of Albert W. Ondis, III, Alexis Ondis and April Ondis, as co-executors of the Estate of Albert W. Ondis.
- (4) These shares are owned indirectly by Albert W. Ondis, III.
- (5) These shares are owned indirectly by Albert W. Ondis, III, as trustee of a trust for a child of Albert W. Ondis, III.
- (6) These shares are owned directly by Albert W. Ondis, III.
- (7) These shares are owned indirectly by Alexis Ondis, as trustee of a trust for a child of Alexis Ondis.
- (8) These shares are owned directly by Alexis Ondis.
- (9) These shares are owned indirectly by April Ondis.
- (10) These shares are owned directly by April Ondis.

Remarks:

Albert W. Ondis, III, Alexis Ondis and April Ondis are each co-executors of the Estate of Albert W. Ondis and ten percent ow 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.