

OCONNELL JOSEPH P  
Form 3  
September 01, 2017

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â OCONNELL JOSEPH P		(Month/Day/Year)	AstroNova, Inc. [ALOT]	
(Last)	(First)	(Middle)	09/01/2017	
C/O ASTRONOVA, INC.,Â 600			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
E GREENWICH AVENUE			(Check all applicable)	
(Street)			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
W WARWICK,Â RIÂ 02893			<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Form filed by One Reporting Person
(City)	(State)	(Zip)	(give title below) (specify below)	<input type="checkbox"/> Form filed by More than One Reporting Person
			Interim CFO	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	114,864	D	Â
Common Stock	1,718	I	Held in Employee Stock Ownership Plan

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

SEC 1473 (7-02)

**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.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership
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	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	(Instr. 5)
Stock Option (Right to Purchase)	03/17/2014 <sup>(1)</sup>	03/17/2024	Common Stock	7,500	\$ 14.2	D	Â
Stock Option (Right to Purchase)	03/29/2012 <sup>(1)</sup>	03/29/2022	Common Stock	5,175	\$ 8.35	D	Â
Stock Option (Right to Purchase)	03/15/2010 <sup>(1)</sup>	03/15/2020	Common Stock	4,800	\$ 7.36	D	Â
Restricted Stock Unit	03/14/2016	Â <sup>(2)</sup>	Common Stock	64	\$ 0 <sup>(2)</sup>	D	Â
Restricted Stock Unit	05/20/2015	Â <sup>(3)</sup>	Common Stock	6,189	\$ 0 <sup>(3)</sup>	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
OCONNELL JOSEPH P C/O ASTRONOVA, INC. 600 E GREENWICH AVENUE W WARWICK, RI 02893	Â	Â	Â Interim CFO	Â

## Signatures

/s/ Margaret V. Boericke, by power of attorney 09/01/2017

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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) Date indicated is date of grant. Option vests in four equal installments, commencing on the date of grant.
- (2) Each restricted stock unit represents a contingent right to receive one share of ALOT common stock. Shares vest in two equal installments on May 14, 2018 and 2019.
- (3) Each restricted stock unit represents a contingent right to receive one share of ALOT common stock. Shares vest in two equal installments on May 20, 2018 and 2019.

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### Remarks:

This report is being filed in connection with the reporting person's appointment to the position of

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.