FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL								
	OMB Number:	3235-0287								
l	Estimated average burden									
l	hours per response:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	nd Address of ra Sumit		2. Issuer Name and Ticker or Trading Symbol CIRCOR INTERNATIONAL INC [ CIR ]											all appli Directo	or 10% Ov		vner					
(Last) (First) (Middle) 30 CORPORATE DRIVE, SUITE 200							3. Date of Earliest Transaction (Month/Day/Year) 04/05/2019										Officer (give title below)  President, Industr			below)	ъреспу -	
(Street) BURLINGTON MA 01803 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)										ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						ar) l	2A. Deemed Execution Date, if any (Month/Day/Year)		Co	Transaction Dispos Code (Instr. 5)		Dispose	urities Acquired (A) ed Of (D) (Instr. 3,			4 and Securiti Benefic Owned		ies Fe cially (D Following (I)		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Co	ode '	v	Amount	t (A) or (D)		Price	- 1	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 04/05/							/2019 04/05/		1	M		392	2 A		(1)		4,745		D			
Common Stock 04/05/							04/05	1/05/2019		F		10	D		(1)		4,735		D			
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. Deeme Execution if any (Month/Day	Date,	4. Transa Code (I B)		ı of		6. Date Exercisal Expiration Date (Month/Day/Year)			Amo Secu Undo Deriv		7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		Der Sec	Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exerci	sable	Ex Da	piration te	Title	OI N	lumber							
Restricted Stock Unit	\$0.00	04/05/2019	04/05/20	019	M		392		04/05/	2019	03/	/05/2028	Commo		392		(1)	784		D		

## **Explanation of Responses:**

1. The Restricted Stock Units (RSUs), the conversion of which are reported herein, were granted to the Reporting Person by the issuer as part of equity incentive grants made by the issuer on 3/05/2018 utilizing a fair market value (FMV) of a share of the issuers stock of \$42.62. The RSU grant vests in equal portions over a three year period, and are received by the Reporting Person upon vesting, on a one-for-one basis. This report reflects the vesting of one-third portion of the original RSU grant and the acquisition by the Reporting Person of the underlying shares minus sufficient shares withheld to pay applicable

## Remarks:

/s/ Tanya Dawkins, attorney-infact 04/08/2019

\*\* 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 Number.