

☐ 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 *				2. I	2. Issuer Name and Ticker or Trading Symbol								5. Relationshi	5. Relationship of Reporting Person(s) to Issuer				
														(Check all app	olicable)			
Smith David S				As	AstroNova, Inc. [ALOT]								ъ.		100/	0		
(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)								Director 10% Owner X Officer (give title below) Other (specify below)					
								2/2						XOfficer (gr			iei (specify)	below)
C/O ASTRO			EAS	ST				3/2	7/20	23					011100	-		
GREENWIC																		
	(Stree	et)			4. I	f Am	endme	nt, Date O	rigin	al Fil	ed (Mi	M/D	D/YYYY	6. Individual o	or Joint/G	roup Filing (Check Appl	icable Line)
WEST WARWICK, RI 02893														X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(C	ity) (Star	te) (Zip))		Rul	e 101	b5-1(c)	Transactio	on In	dicat	ion							
					☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan													
					that	is in	tended	to satisfy	the a	ıffirm	ative	def	ense co	nditions of Rule	10b5-1(c)	. See Instruc	tion 10.	
		,	Table	I - No	n-Deri	ivati	ve Seci	ırities Acc	quire	ed, Di	spose	d o	f, or Bo	eneficially Owne	d			
1. Title of Security (Instr. 3)			s. Date	ate 2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	or Disposed of (D)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership			
								Code	V	Amou) or D)	Price					(Instr. 4)
Common Stock 3/27/202							M		2956		4	\$0.00	22812			D		
Common Stock 3/27/202				2023			F		1323])	\$11.94		21489		D		
	Tab	le II - Deri	vative	Secu	rities l	Bene	ficially	Owned (a	e.g.,	puts,	calls,	wa	rrants	options, conver	tible secu	ırities)		
Gecurity Conversion or Exercise Price of Derivative Conversion of Exercise Price of Derivative Conversion Date Execution Date, if any (I			4. Trans. Code (Instr. 8)		Acquired Disposed	ve Securities d (A) or	6. Date Exercisable and Expiration Date			:	Securitie	nd Amount of s Underlying re Security and 4)	nderlying ecurity Security 4) Derivative Security (Instr. 5)	derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
	Security			-	Code	V	(A)	(D)	Date Exerc	cisable	Expirat Date	ion	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Restricted Stock Units	<u>(1)</u>	3/27/2023			M			2956	9	(2)	<u>(2)</u>		Commo Stock	2950	\$0.00	0	D	

Explanation of Responses:

- (1) Each restricted stock unit represents a contingent right to receive one share of ALOT common stock.
- (2) 100% of the restricted stock units have fully vested and settled.

Reporting Owners

Reporting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Smith David S									
C/O ASTRONOVA, INC.			Cl.:-f E::-1 Off:						
600 EAST GREENWICH AVENUE	2		Chief Financial Officer						
WEST WARWICK, RI 02893									

Signatures

/s/ David S. Smith 3/29/2023

**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.