### FORM 4

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

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

# Estimated average burden hours per response... 0.5 UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL OMB Number: 3235-0287

ECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## 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)			
THE TIEBLES T					AstroNova, Inc. [ ALOT ]							X Director				
(Last)	(First)	(Mi	iddle)	3. 1	3. Date of Earliest Transaction (MM/DD/YYYY)						Officer (give title below) Other (specify below)					
C/O ASTRONOVA, INC., 600 EAST GREENWICH AVENUE					8/28/2025											
(Street)				4. ]	4. If Amendment, Date Original Filed (MM/DD/YYYY)						YY) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)				
WEST WARWICK, RI 02893  (City) (State) (Zip)												X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(0	City) (Stat	te) (Zip		lon-Der	rivati	ive Sec	urities A	cqui	red, Dis	sposed o	f, or l	Beneficially Own	ed			
1. Title of Security (Instr. 3)				2A. D Execu Date,		3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Following Reported Transaction(s)  Ownership Indirect Form: Beneficial			Beneficial Ownership		
							Code	V	Amoun	(Ď)	Price	+			4)	
Common Stock			8/28	3/2025			A <sup>(1)</sup>		3,071	A	\$0			21,826	D	Juniper
Common Stock														535,203	I	Targeted Opportunity Fund, L.P. (2)
	Tab	le II - Der	ivative Sec	urities	Bene	eficially	y Owned	(e.g	., puts,	calls, wa	ırran	ts, options, conve	rtible secu	urities)		
(Instr. 3) or Exercise Price of Derivative Security		4. Trans. (Instr. 8)	r. 8) Derivati Acquire Dispose (Instr. 3		tive Securities ed (A) or ed of (D) 3, 4 and 5)		Date Exer and Expirati	on Date  Expiration	Secur Deriv (Instr.	e and Amount of ities Underlying ative Security 3 and 4) Amount or Number of Shares		9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownersh Form of Derivativ Security Direct (I or Indire	(Instr. 4)		

#### **Explanation of Responses:**

- (1) Restricted stock award made to the reporting person pursuant to the Amended and Restated Non-Employee Director Annual Compensation Program.
- (2) These shares are held by Juniper Targeted Opportunity Fund, L.P. ("Juniper Fund"). Juniper Investment Company, LLC ("Juniper Investment") serves as investment manager for Juniper Fund. Mr. Michas is a managing member of Juniper Investment and of the general partner of Juniper Fund and, therefore, may be deemed to beneficially own the shares held by Juniper Fund. Mr. Michas disclaims beneficial ownership of holdings of Juniper Fund reflected herein except to the extent of his pecuniary interest therein.

#### **Reporting Owners**

Panarting Overage Name / Address	Relationships						
Reporting Owner Name / Address	Director	Officer	Other				
MICHAS ALEXIS P C/O ASTRONOVA, INC. 600 EAST GREENWICH AVENUE WEST WARWICK, RI 02893	X						

#### **Signatures**

/s/ Daniel Clevenger, by Power of Attorney	9/2/2025			
**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.