FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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ngton, D.C. 20549	OMB APPROVAL

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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

1. Name and Address of Reporting Person* <u>Thompson Kristen Holt</u>					2. Issuer Name and Ticker or Trading Symbol INTEST CORP [INTT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Vother (specify							
(Last) (First) (Middle) 10 HESSIAN WAY				3. Date of Earliest Transaction (Month/Day/Year) 06/22/2017									officer (give title X Other (specify below) Member of 10% Group							
(Street)	HILL N.	J	08003		4. If Amendment, Date of			of Original Filed (Month/Day/Year)					6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(S	tate)	(Zip)											Person						
		Tab	le I - N	on-Deriv	ative	Secu	ırities	Ac	quire	d, Di	sposed o	f, or B	enefi	cially	y Owne	ed		1		
		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		<i>'</i>	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		ed (A) or tr. 3, 4 a	nd 5)	Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	Amount	(A) or (D)	Price	•	Transaction(s) (Instr. 3 and 4)				(1113411 47					
Common	Stock			06/22/2	017				S		16,900	D	\$7.1	627		0		D ⁽¹⁾		
Common	Stock														150),427		I ⁽²⁾	By self as Trustee of the Connie Holt GST Exempt Residuary Trust	
Common	Stock														115	5,000		I ⁽²⁾	By self as Trustee of the Holt Charitable Remainder Unitrust	
Common	Stock														260),000		I ⁽²⁾	By self as Trustee of the Alyn R. Holt Trust fbo Kristen Holt Thompson	
		Ti	able II								osed of, convertib				Owned					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 34. Deem Execution if any (Month/Day/Year)		on Date, Transa Code		5. Number of		ber ive ies ed	6. Date Exerc Expiration D (Month/Day/		cisable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
Explanation	of Respons	ses:			Code	v	(A) (I	D)	Date Exercis	sable	Expiration Date	Title	Amoun or Numbe of Shares	r						

/s/ David A. Sirignano, by power of attorney

06/26/2017

** 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.

^{1.} The disposition reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by this reporting person on August 30, 2016. Accordingly, the reporting person had no discretion with regard to the timing of the transaction. With the completion of the disposition reported in this Form 4, the trading plan has been terminated because the reporting person no longer beneficially owns any shares of the issuer in her individual capacity.

^{2.} The reporting person disclaims beneficial ownership of the securities in each of these accounts except to the extent of her pecuniary interest.

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.	