SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** SECURITIES

OMB APPROVAL

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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 Goodrich Michael F.	1 <sup>*</sup> 2. Date of E Requiring S (Month/Day 01/15/202	tatement /Year)	3. Issuer Name and Ticker or Trading Symbol <u>INTEST CORP</u> [ INTT ]				
(Last) (First) (Middle) C/O INTEST CORP			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)	
804 EAST GATE DR, SUITE 200			X Officer (give title below)		(specify	6. Individual or Joint/Group Filing (Check Applicable Line)	
(Street) MT. NJ 08054 LAUREL	_		Division Pres-P			A Person	by One Reporting by More than One Person
(City) (State) (Zip)							
Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)	Form: I (D) or I	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned           (e.g., puts, calls, warrants, options, convertible securities)							
Expi		tisable and ate /ear)	3. Title and Amount of Underlying Derivative 5 (Instr. 4)		4. Conversion or Exercis	se Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	(				Price of	Direct (D)	

**Explanation of Responses:** 

No securities are beneficially owned.

## /s/ Michael F. Goodrich

01/18/2024 Date

\*\* Signature of Reporting Person

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 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).

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.