FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden 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).

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

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person* BURNEY DAVID C			2. Issuer Name and Ticker or Trading Symbol ASTRONICS CORP [ATRO]							1		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 1801 ELMWOOD AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 03/05/2004							ar)		X Officer (give title below) Other (specify below) VP-Finance, Treasurer				
BUFFAI	.O, NY 14	(Street)		4. If Amer 02/20/20		ent, Da	ate Ori	iginal	Filed(Mon	th/Day/	Year)		_ Form filed	by One Reporti	oup Filing(Che ng Person ne Reporting Pers		Line)
(City) (State) (Zip)				Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y			2A. Deemed Execution Date, any (Month/Day/Yea			(Instr.		(A)	4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		(D) Beneficially		of Securities y Owned Following ransaction(s) 14)		Ownership Form: Direct (D)	Beneficial Ownership	
						Co	de	V Amo		nt (A) or Price		ce			or Indirect (I) (Instr. 4)	(Instr. 4)	
\$.01 Par	\$.01 Par Value Common Stock										2	,027	I		D		
\$.01 Par	Value Cla	ss B Stock									7	743			D		
1. Title of	2.	3. Transaction		e.g., puts,		s, wai		uired,	orm disp , Dispose ons, conv	lays d of, o	a currer or Benefi e securit	cially (lid OMB (control nui			11. Natur
Security	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, i	Deemed 4. 5. Consider the control of			vative urities uired or posed D) cr. 3,	6. Da Expir (Mor	5. Date Exercisable and Expiration Date (Month/Day/Year) CS			7. Tit Amo Unde Secur	le and unt of rlying ities . 3 and 4)	Derivative Security (Instr. 5)		Owners Form of Derivati Security Direct (or Indire	Beneficia Ownersh (Instr. 4)
				Code	V	(A)		Date Exerc	cisable	Expi	iration	Title	Amount or Number of Shares				
Option	\$ 5.194							11/0)4/1999	11/0	04/2008	\$.01 PV Con Stk			1,863	D	
Option	\$ 5.194							11/0)4/1999	11/0	04/2008	\$.01 PV C1 E Stk	600		699	D	
Option	\$ 5.159							01/1	18/2000	01/	18/2009	\$.01 PV Con Stk	1 863		1,863	D	
Option	\$ 5.159							01/1	18/2000	01/	18/2009	\$.01 PV C1 E Stk	600		699	D	
Option	\$ 6.146							01/1	18/2001	01/	18/2010	\$.01 PV Con Stk	1,243		1,243	D	

Option	\$ 6.146			01/18/2001	01/18/2010	\$.01 PV Cl B Stk	465	465	D	
Option	\$ 7.646			01/19/2002	01/19/2011	\$.01 PV Com Stk	1,242	1,242	D	
Option	\$ 7.646			01/19/2002	01/19/2011	\$.01 PV Cl B Stk	311	311	D	
Option	\$ 10.221			01/25/2003	01/25/2012	\$.01 PV Com Stk	1,242	1,242	D	
Option	\$ 5.328			01/24/2004	01/24/2013	\$.01 PV Com Stk	3,727	3,727	D	
Option	\$ 5.49			02/19/2005	02/19/2014	\$.01 PV Com Stk	9,400	9,400	D	

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
BURNEY DAVID C 1801 ELMWOOD AVENUE BUFFALO, NY 14207			VP-Finance, Treasurer						

Signatures

/s/ John B. Drenning, as Power of Attorney for David C. Burney	03/05/2004
-Signature of Reporting Person	Date

Explanation of Responses:

- * 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).

Remarks:

Adjustments to substitution options and exercise price as a result of MOD-PAC Corp. spin-off.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.