FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, 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

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

Instru	ction I(b).			111,001111	ni compi	,	01 17 .									
Print or Ty	pe Response	es)														
1. Name an KEANE l		f Reporting Pers	on *	2. Issuer Name ASTRONICS	٠.	nbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner									
(Last) (First) (Middle) 1801ELMWOOD AVE				3. Date of Earlie 01/03/2007	st Transacti	ion (Mo	onth/Day/	Year)		X Officer (give title below) Other (specify below) Chairman						
(Street) BUFFALO, NY 14207				4. If Amendmen	t, Date Orig	ginal Fi	led(Month/	Day/Year)	_X_ Form filed	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City	7)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year			2A. Deemed Execution Date, any (Month/Day/Yea	(Instr. 8)		4. Securities Acquir (A) or Disposed of ((Instr. 3, 4 and 5)						6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership			
					Code	V	Amount	(A) or (D)	Price				(I) (Instr. 4)	(msu. 4)		
\$.01 Par Value Common Stock 01/03/2007			S		1,000	D	\$ 16.99	170,934			D					
\$.01 Par Value Class B Stock									490,887			D				
\$.01 Par Value Common Stock								58,879			I	By Spouse				
\$.01 Par \	Value Clas	s B Stock								24,828			I	By Spouse		
Reminder:	Report on a	separate line for	each class of securi	ties beneficially o	wned direc	tly or i	ndirectly.			1		1				
						cont	ained in	this fo	orm a	the collect re not requi ently valid (red to resp	ond unles		1474 (9-02)		
				Derivative Secur e.g., puts, calls, v												
Security	Conversion	3. Transaction Date (Month/Day/Ye	3A. Deemed Execution Date	4. Transaction Code ear) (Instr. 8)	5. Number	6. Date Expira	Exercisa tion Date	able and	I 7. A U S	. Title and mount of Inderlying ecurities Instr. 3 and 4)	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported	Owners Form of	ve Ownersh (Instr. 4)		

Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	Execution Date, if	Code	tion)			Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial
				Code	V	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Option	\$ 11.244							01/25/2005	01/25/2007	\$.01 PV Com Stk	14,819		14,819	D	
Option	\$ 10.221							01/25/2003	01/25/2012	\$.01 PV Com Stk	4,936		4,936	D	
Option	\$ 5.328							07/24/2003	01/24/2013	\$.01 PV Com Stk	55,912		55,912	D	
Option	\$ 5.49							08/19/2004	02/19/2014	\$.01 PV Com Stk	27,300		27,300	D	
Option	\$ 5.09							06/14/2005	12/14/2014	\$.01 PV Com Stk	29,500		29,500	D	
										\$.01					

Option	\$ 13.41			09/06/2006	03/06/2016	PV	5,000	5,000	D	
1	, , , ,					Com		,,,,,,		
						Stk				

Reporting Owners

D. (1.0 N. (411)	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
KEANE KEVIN T									
1801ELMWOOD AVE	X	X	Chairman						
BUFFALO, NY 14207									

Signatures

/s/David Burney, as Power of Attorney for Kevin T. Keane	01/04/2007
**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).
- (1) Mr. Keane disclaims any beneficial ownership in shares held by his wife.

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.