# FORM 4 Check this box if no

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

OMB APPROVAL
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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	es)												
1. Name and Address of Reporting Person * KEANE KEVIN T				2. Issuer Name ASTRONICS				bol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director X 10% Owner					
(Last 1801 ELN	) MWOOD A	(First) AVE	3. Date of Earlies 03/20/2007	st Transacti	on (Mo	onth/Day/	Year)	X Officer (give title below) Other (specify below)  Chairman						
(Street) BUFFALO, NY 14207				4. If Amendment	, Date Orig	inal Fi	led(Month/E	Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)				-	Γable I - No	on-Der	ivative So	ecurities	ired, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	ecurity	1	Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yea	(Instr. 8		4. Securi (A) or D (D) (Instr. 3,	4 and 5	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		lowing (		7. Nature of Indirect Beneficial Ownership (Instr. 4)
\$.01 PV C	Com Stk									183,753			)	
\$.01 PV C	Cl B Stk									490,887			)	
\$.01 PV (	Com Stk									58,879		]		By Spouse (1)
\$.01 PV (	Cl B Stk									24,828		J		By Spouse (1)
Reminder: l	Report on a :	separate line for e	ach class of securiti	es beneficially o	wned direct	Pers	ons who	this fo	rm ar	the collect	ed to resp	ond unless		474 (9-02)
				erivative Secur		red, Di	isposed of	, or Ben	eficia	lly Owned				
Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Yea	3A. Deemed Execution Date,	4. Transaction Code Instr. 8)	5. Number of	6. Dat Expira		ble and	7. A U S	Title and mount of Inderlying ecurities nstr. 3 and 4)	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following	f 10. Ownersh Form of Derivati Security Direct (I	Benefici Ownersl (Instr. 4)

	Conversion		3A. Deemed Execution Date, if any (Month/Day/Year)	Code	tion		tities red sed 3, 4,		Amount of Underlying		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Option	\$ 17.6	03/20/2007		A		5,000		09/20/2007	03/20/2017	\$.01 PV Com Stk	5,000	\$ 17.6	5,000	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	
Option	\$ 13.41							09/06/2006	03/06/2016	\$.01 PV	5,000		5,000	D	

		Com		
		Stk		

### **Reporting Owners**

D ( O N / 11)	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
KEANE KEVIN T 1801 ELMWOOD AVE BUFFALO, NY 14207	X	X	Chairman					

#### **Signatures**

/s/David C. Burney, as Power of Attorney for Kevin T. Keane	03/22/2007
**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.

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

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.