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

\$ 32.77

Option

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 1(b).				11110	ounic.	iii Co	mpa	iiiy 710	Jt 01 1 .	7-10								
_	pe Response																		
Name and Address of Reporting Person * MCKENNA ROBERT J				2. Issuer Name and Ticker or Trading Symbol ASTRONICS CORP [ATRO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) (First) (Middle) 38 QUARTERMASTER DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 03/02/2018									give title below)		Other (specif	y below)	
(Street) SALEM, SC 29676				4. If Amendment, Date Original Filed(Month/Day/Year)								_Form filed	or Joint/G by One Reporti by More than O	ng Person		cable Li	ne)		
(City		(State)	(Zip)			7	[able	I - N	on-Dei	rivative	Securities	s Aco	mire	d. Dispose	ed of, or Be	eneficially	Owned		
1.Title of S	Security		2. Transaction	2A. 1	2A. Deemed 3. Transa								_				6.	7. N	Vature of
(Instr. 3) Date (Month/Day/Year)		Exec any	Execution Date, if any (Month/Day/Year)			(Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)		of			Owned Following ansaction(s)		Ownershi Form: Direct (D or Indirec	ip Indi Ben Ow	Beneficial Ownership		
							С	Code	V	Amoui	(A) or (D)	Price					(I) (Instr. 4)		
\$.01 PV Com Stk											13,	13,719		I	Mc Re	Robert J McKenna Revocable Trust (1)			
Reminder:	Report on a	separate line for	each class of securi	ities b	penefici	ally o	wned	direc	Pers	ons w	ho respo	rm a	re n	ot requir	on of info ed to resp MB contr	ond unle	ss	EC 147	74 (9-02)
			Table II -								of, or Ben			Owned					
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Ye		e, if Transaction Code (ar) (Instr. 8)		of		Expira	i. Date Exercisable and Expiration Date Month/Day/Year)		I S	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e Own Form Output Deriv Secu Direct or In	vative rity: ct (D) direct	11. Natur of Indirec Beneficia Ownersh (Instr. 4)	
					Code	V	(A)	(D)	Date Exerci	isable	Expiration Date	1 [Γitle	Amount or Number of Shares					
Option	\$ 41.18						. ,		09/03	3/2014	03/03/20)24	\$.01 PV Com Stk	2,000		2,000)	D	
Option	\$ 41.18								09/03	3/2014	03/03/20	24	\$.01 PV Cl B Stk	1,174		1,174		D	
Option	\$ 52.76								09/10	0/2015	03/10/20)25	\$.01 PV Com Stk	3 000		3,000)	D	
Option	\$ 52.76								09/10)/2015	03/10/20)25	\$.01 PV Cl B Stk	968		968		D	
Option	\$ 26.37								08/26	5/2016	02/26/20)26	\$.01 PV Com Stk	4.000		4,000)	D	
Option	\$ 26.37								08/26	5/2016	02/26/20	26	\$.01 PV Cl B	600		600		D	

Stk \$.01

4,000

4,000

D

09/07/2017 03/07/2027 PV

							Com					
Option	\$ 39.15	03/02/2018	A	4,000	03/02/2019	03/02/2028	\$.01 PV Com Stk	4,000	\$ 39.15	4,000	D	

Reporting Owners

Demonting Common Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
MCKENNA ROBERT J 38 QUARTERMASTER DRIVE SALEM, SC 29676	X								

Signatures

/s/Julie Davis as Power of Attorney for Robert J. McKenna	03/06/2018
**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) Represents shares held by the Robert J. McKenna Revocable Trust. The beneficiaries of the trust are the reporting persons immediate family. The reporting person serves as one of two trustees and shares voting and investment power.

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.