FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPRO	VAL				
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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					0	r Sec	tion 30(h	) of the Ir	vestmen	t Con	pany Act of	1940								
1. Name and Address of Reporting Person * BRADY ROBERT T						2. Issuer Name <b>and</b> Ticker or Trading Symbol ASTRONICS CORP [ ATRO ]									S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last)	(First)	(N		3. Date of Earliest Transaction (Month/Day/Year) 02/15/2023									give title	0ther (specify below)						
740 PALOMINO DR.					4. lf /	Amer	ndment, E	Date of O	riginal Fil	ed (M	onth/Day/Ye	6. lı	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person							
(Street) JACKSON CITY WY 83001															Form filed by More than One Reporting Person					
(City)	(State)	(Z	Zip)																	
		Ta	able I - No	n-De	rivativ	e S	ecuriti	es Acq	uired,	Disp	osed of,	or Bene	ficially (	Owned						
Date				Date	nsaction h/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at			Securities Beneficial Following	Beneficially Owned Following Reported		nership : Direct (D) lirect (I) . 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
\$.01 PV Com \$				-		15/2023		M		3,000		\$12.6			D					
					15/2023				M M		1,982	_	\$14.9		65,230		D			
.01 PV Cl B St				-		5/2023					3,570		\$12.6	_	178,646		D			
01 PV Cl B Stk 02/1:					15/2023				M			<i>'</i>			175,076		D			
ı			Table II -								sed of, o			ned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Ex (Month/Day/Year) if a	3A. Deemed Execution D if any (Month/Day	Date,	Code (Instr.				6. Date Exercisable Expiration Date (Month/Day/Year)		ite	7. Title and Amor Securities Under Derivative Securi (Instr. 3 and 4)			9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A) (D)		Date Exercisable		Expiration Date	Title	Amount or Number of Share	.	Transaction(s (Instr. 4)		;)			
Option	\$12.65	02/15/2023			M			3,000	08/22/2	.013	02/22/2023	\$.01 PV Com Stk	3,000	\$12.65	0		D			
Option	\$12.65	02/15/2023			M			3,570	08/22/2	.013	02/22/2023	\$.01 PV C B Stk	3,570	\$12.65	0		D			
Option	\$35.81								09/03/2	014	03/03/2024	\$.01 PV Com Stk	2,000	)	2,00	0	D			
Option	\$35.81								09/03/2	.014	03/03/2024	\$.01 PV C B Stk	1,650	)	1,650		D	<u> </u>		
Option	\$45.88								09/10/2	015	03/10/2025	\$.01 PV Com Stk	3,000	)	3,000	0	D	<u> </u>		
Option	\$45.88								09/10/2	015	03/10/2025	\$.01 PV C B Stk	1,563	3	1,56	3	D			
Option	\$22.93								08/26/2	016	02/26/2026	\$.01 PV Com Stk	4,000		4,000	0	D			
Option	\$22.93								08/26/2	016	02/26/2026	\$.01 PV C B Stk	1,290	)	1,29	0	D			
Option	\$28.5								09/07/2	017	03/07/2027	\$.01 PV Com Stk	4,000	)	4,00	0	D			
Option	\$28.5						_		09/07/2	.017	03/07/2027	\$.01 PV C B Stk	600		600		D			
Option	\$34.04								03/02/2	019	03/02/2028	\$.01 PV Com Stk	4,000	)	4,000	0	D	<u> </u>		
Option	\$34.04								03/02/2	019	03/02/2028	\$.01 PV C B Stk	600		600		D			
Explanation of R	enonese.																			

Explanation of Responses:

Remarks:

/s/Julie Davis as Power of Attorney for Robert T. Brady

02/16/2023

\*\* Signature of Reporting Person

Date

- \* 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).

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.