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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 0.5 hours per response...

2,019

757

2,019

757

1,346

505

1,346

Amount

Number

Shares

2,019

757

2,019

757

1,346

505

1,346

of

Title

\$.01 PV

Com Stk \$.01 PV

Cl B Stk \$.01 PV

Com Stk \$.01 PV

Cl B Stk \$.01 PV

Com Stk \$.01 PV

Cl B Stk \$.01 PV

Com Stk

D

D

D

D

D

D

D

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations

Option

Option

Option

Option

Option

Option

Option

\$ 4.794

\$ 4.794

\$ 4.761

\$ 4.761

\$ 5.672

\$ 5.672

\$ 7.056

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed murguent to Section 16(a) of the Securities Evolunce Act of 1024 or Section 20(b) of the

	ontinue. See ction 1(b).	rnea pu	isuant to Section	Investmer			_		01 5	ection 50(ii) or the				
Print or Ty	pe Response	es)													
Name and Address of Reporting Person * BURNEY DAVID C				2. Issuer Name and Ticker or Trading Symbol ASTRONICS CORP [ATRO]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 111 PINEWOOD DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 02/19/2004						X Officer (give title below) Other (specify below) VP-Finance, Treasurer					
(Street) WEST SENECA, NY 14224				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form 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, i any (Month/Day/Yea	f Code (Instr. 8)	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			wnership orm: irect (D)	eneficial wnership		
					Code	V	Amount	(A) or (D)	Price			(I	Indirect (I) nstr. 4)	nstr. 4)	
\$.01 Par Value Common Stock										2,027		D			
\$.01 Par Value Class B Stock									743		D				
Reminder:	Report on a	separate line for e	ach class of securit	ies beneficially ov	vned direct	Pers	ons who	this for	m ar	the collecti e not requir	ed to resp	ond unless	SEC 14	74 (9-02)	
				Derivative Securit e.g., puts, calls, w											
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Yea		if Transaction of Code Dar) (Instr. 8) SA	Number f derivative ecurities acquired A) or phisposed f (D) firstr. 3, 4,	Expira	tion Date		A: U: Se	mount of	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	(Instr. 4)	

and 5)

(A) (D)

Code V

Date

Exercisable

Expiration

Date

11/04/1999 11/04/2008

11/04/1999 11/04/2008

01/18/2000 01/18/2009

01/18/2000 01/18/2009

01/18/2001 01/18/2010

01/18/2001 01/18/2010

01/19/2002 01/19/2011

Option	\$ 7.056					01/19/2002	01/19/2011	\$.01 PV Cl B Stk	337		337	D	
Option	\$ 9.433					01/25/2003	01/25/2012	\$.01 PV Com Stk	1,346		1,346	D	
Option	\$ 4.917					01/24/2004	01/24/2013	\$.01 PV Com Stk	4,039		4,039	D	
Option	\$ 5.49	02/19/2004	A	9,40	0	02/19/2005	02/19/2014	\$.01 PV Com Stk	9,400	\$ 5.49	9,400	D	

Reporting Owners

D (1 0 N /A)	Relationships								
Reporting Owner Name / Address	Director	Director 10% Owner Officer							
BURNEY DAVID C 111 PINEWOOD DRIVE			VP-Finance, Treasurer						
WEST SENECA, NY 14224									

Signatures

/s/ John B. Drenning, as Power of Attorney for David C. Burney	02/20/2004
**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).

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

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.