# Check this box if no

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

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

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

	pe Response		*									D -1-4' 1	iep	-time D. C.	) 4- I	
Name and Address of Reporting Person   GUNDERMANN PETER J				2. Issuer Name and Ticker or Trading Symbol ASTRONICS CORP [ATRO]							x	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
(Last) (First) (Middle) 130 COMMERCE WAY				3. Date of Earliest Transaction (Month/Day/Year) 12/14/2004						X	X Officer (give title below) Other (specify below) President					
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)							Form filed	by One Reportin			ne)		
	JRORA, N		(7:-)									Form filed b	y More than Or	ne Reporting Perso	n	
(City		(State)	(Zip)	) A D		1			on-Derivative							NI 4
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea		Oate Month/Day/Year)	2A. Deemed B. S. Transa Code (Instr. 8) (Month/Day/Year)			(A) or Disposed of (D) Beneficial (Instr. 3, 4 and 5) Reported			ported Transaction(s) str. 3 and 4) Fo or (I)		Ownership of Be Orrect (D) or Indirect (Ir	eneficial wnership				
Reminder:	Report on a	separate line for eac							Persons wi contained i form displa	no respond to in this form a ays a current	are no	ot require	ed to resp	ond unless		74 (9-02)
			(6	.g., p			warran	ts, o	red, Disposed ptions, conver	tible securitie	es)					
Derivative Conversion Da		3. Transaction Jate Execution Date, Month/Day/Year) (Month/Day/Year)		Code			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficia
				С	ode	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Option	\$ 2.594								12/20/1997	12/20/2006	\$.01 PV Com Stk	6,834		6,834	D	
Option	\$ 2.594								12/20/1997	12/20/2006	\$.01 PV Cl B Stk	2,563		2,563	D	
Option	\$ 5.159								01/18/2000	01/18/2009	\$.01 PV Com Stk	11,928		11,928	D	
Option	\$ 5.159								01/18/2000	01/18/2009	\$.01 PV Cl B Stk	4,472		4,472	D	
Option	\$ 6.146								01/18/2001	01/18/2010	\$.01 PV Com Stk	11,183		11,183	D	
Option	\$ 6.146								01/18/2001	01/18/2010	\$.01 PV Cl B Stk	4,193		4,193	D	
Option	\$ 12.266								04/26/2002	04/26/2011	\$.01 PV Com Stk	10,313		10,313	D	
Option	\$ 12.266							_	04/26/2002	04/26/2011	\$.01 PV Cl B	2,578		2,578	D	

								Stk					
Option	\$ 10.221					01/25/2003		\$.01 PV Com Stk	11,555		11,555	D	
Option	\$ 5.328					01/24/2004		\$.01 PV Com Stk	33,547		33,547	D	
Option	\$ 5.49					02/19/2005		\$.01 PV Com Stk	40,800		40,800	D	
Option	\$ 5.09	12/14/2004	A	4	14,000	12/14/2005	12/14/2014	\$.01 PV Com Stk	44,000	\$ 0	44,000	D	

## **Reporting Owners**

D	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
GUNDERMANN PETER J 130 COMMERCE WAY	X		President					
EAST AURORA, NY 14052	Λ		riesident					

### **Signatures**

John B. Drenning, as Power of Attorney for Peter J. Gundermann	12/16/2004	
**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).

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

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.