Edgar Filing: ASTRO MED INC /NEW/ - Form 4

| ASTRO ME | ED INC /NEW/ | | | | | | | | | | |
|--|---|------------------|---------------------|--|---|----------|---|--|--|---|--|
| Form 4 | 2006 | | | | | | | | | | |
| February 06 | | | | | | | | | OMB A | PPROVAL | |
| FORM | UNITED | STATES | | RITIES A | | | NGE CO | OMMISSION | OMB Number: | 3235-0287 | |
| Check this box if no longer subject to Section 16. Form 4 or | | | | | NGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | Expires: January 31, 2005 Estimated average burden hours per | |
| Form 5 obligation may con See Instr 1(b). | Filed pu ons Section 17 | (a) of the | Public U | | lding Co | npany | Act of 1 | Act of 1934, 1935 or Section | response | 0.5 | |
| (Print or Type | Responses) | | | | | | | | | | |
| PIZZUTI EVERETT V Symbol | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) | (Middle) | | of Earliest T | | L | 1 | (Check | c all applicable | :) | |
| 600 EAST | GREENWICH A | VENUE | (Month/I 02/02/2 | Day/Year) 2006 | | | - | _X_ Director _X_ Officer (give pelow) Chief O | | Owner er (specify er | |
| | | | d(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| WEST WA | RWICK, RI 028 | 93 | | | | | Ī | Form filed by M Person | ore than One Re | porting | |
| (City) | (State) | (Zip) | Tab | le I - Non- | Derivative | Secur | ities Acqu | ired, Disposed of, | or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution any | n Date, if | 3. Transactic Code (Instr. 8) Code V | omr Dispos (Instr. 3, | sed of (| D) 5) Price | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 02/02/2006 | | | М | 55,000 | А | \$ 7.5568 | 248,560 | D (1) | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of 2. 3. Transaction Date 3A. Deemed 4. 5. Number of 6. Date Exercisable and 7. Title and Amount of Derivative Conversion (Month/Day/Year) Execution Date, if TransactiorDerivative **Expiration Date Underlying Securities** Security or Exercise (Month/Day/Year) (Instr. 3 and 4) any Code Securities (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Acquired (A) Derivative or Disposed of Security (D) (Instr. 3, 4, and 5) Amount Date Expiration or Title Exercisable Date Number Code V (A) (D) of Shares Stock Option Common \$7.5568 02/02/2006 Μ 55,000 10/11/1996 03/11/2006 55,000 (Right to Stock purchase) **Reporting Owners**

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|-------------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| PIZZUTI EVERETT V 600 EAST GREENWICH AVENUE WEST WARWICK, RI 02893 | Х | | Chief Operating Officer | | | | | |
| Signatures | | | | | | | | |
| Margaret D. Farrell (Attorney-in-fact for Everett V Pizzuti) | | | 02/06/2006 | | | | | |
| **Signature of Reporting Person | n | | Date | | | | | |
| Evaluation of Doong | n 000 | | | | | | | |

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) The Reporting Person beneficially owns 248,560 shares of the issuer's common stock of which 245,028 shares are held directly by the reporting person and 3,532 shares are held in an employee stock ownership plan.

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.

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