FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, [| D.C. | 20549 |
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|---------------|------|-------|

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|

| OMB APPRO | VAL |
|------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burd | en |
| 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).

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

| 1. Name and Address of Reporting Person* ROBINSON RAY M | | | 2. Issuer Name and Ticker or Trading Symbol AVNET INC [AVT] | | | | | | | Relationship heck all app X Direct | • | | | | | | | |
|---|--|------------|--|----------------|---|--|-----------------|--------|---|--|---|--|--|---|---------------------------------------|-----------------------|---|--|
| (Last) | (Fi | rst) (| Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/02/2004 | | | | | | | Office below | er (give title /) | | Other (specify below) | | |
| 2211 SOUTH 47TH STREET | | | | 4. If | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) PHOENI | X A | Z 8 | 35034 | | | | | | | | | | | | filed by One filed by More | • | - | |
| (City) | (St | tate) (| Zip) | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | Execution Date | | | Code (Instr. 5) | | red (A) or estr. 3, 4 ar | Benefic | ies cially Following | 6. Owner Form: Di (D) or Inc (I) (Instr. | rect direct 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | Code | v | Amount | t (A) or (D) Pri | | Tranca | ction(s) | | | (instr. 4) | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| | | | ransaction of ode (Instr. Derivative | | rative rities rired r osed) | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4) | Ow For Dire or I (I) (| nership m: ect (D) ndirect Instr. 4) | Beneficial Ownership (Instr. 4) | | | |
| | | | | c | Code | v | (A) | (D) | Date Exercisab | | xpiration ate | Title | Amount or Number of Shares | | | | | |
| Phantom Stock Units | \$0 ⁽¹⁾ | 02/02/2004 | | | A | | 120 | | (1) | | (1) | Common Stock | 120 | \$25.7 | 7,542 ⁽²⁾ | | D | |

Explanation of Responses:

- 1. The phantom stock units were accrued under the Avnet, Inc. Deferred Compensation Plan for Outside Directors and are to be settled 1 for 1 in the Issuer's Common Stock after cessation of membership on the Issuer's Board or upon change in control of the Issuer.
- 2. The Number of Derivative Securities Beneficially Owned has been reduced by 39 shares due to a clerical error in the aggregate holdings reported in each of the months of October 2003 through January

Remarks:

Catherine R. Hardwick, by power of attorney

02/02/2004

** Signature of Reporting Person

Date

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

- * 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.