## FORM 4

Instruction 1(b).

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

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

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden					
houre per reenone	0.5				

#### 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

1 Name and		Reporting Person		2. Issuer N	Name and	l Ticker	or Trading	Symbol	5. Re	elationshii	of Reporti	ng Person(s)	to Issuer	
1. Name and Address of Reporting Person *- REEDY TIMOTHY J			2. Issuer Name and Ticker or Trading Symbol WESTELL TECHNOLOGIES INC [WSTL]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
750 NORTH COMMONS DR (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 01/03/2005					X	X Officer (give title below) Other (specify below)  Senior VP				
(Street) AURORA, IL 60504			4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ F	6. Individual or Joint/Group Filing(Check Applicable Line)  X_ Form filed by One Reporting Person  Form filed by More than One Reporting Person  lired, Disposed of, or Beneficially Owned					
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					Acquired,						
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if ) any (Month/Day/Year		3. Trans Code (Instr. 8	(A (In	Securities Acq ) or Disposed of sstr. 3, 4 and 5)			ing Reporte	ed I	wnership orm:	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: F									d to the c					1474 (9-02)
Reminder: F							containe form dis	ed in this for splays a curr sed of, or Bene	ently valid	required OMB co	to respon	d unless th		
I. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year	3A. Deemed Execution Date, i	4. Transact	5. Nu ion of Deriv Secur Acqu (A) o Dispo (D)	rants, our mber vative rities ired rosed of 3, 4,	containe form dis ired, Dispos options, con	ed in this for splays a curr sed of, or Bene evertible secur ercisable and Date	ently valid	required OMB coned	to respondent of number of the second number of the	d unless th	f 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, i	4. Transact	5. Nu ion of Deriv Secur Acqu (A) o Dispo (D) (Instr	rants, oumber vative rities aired r osed of	containd form dis ired, Dispos options, con 6. Date Ex- Expiration	ed in this for splays a curr sed of, or Bene evertible securercisable and Date y/Year)	ently valid eficially Ow ities)  7. Title and Amount of Underlying Securities	required OMB coned	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Owners! Form of Derivati Security Direct (1 or Indire s) (1)	11. Natur of Indire Beneficia Ownersh (Instr. 4)

#### **Reporting Owners**

D ( O N / / )	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
REEDY TIMOTHY J						
750 NORTH COMMONS DR			Senior VP			
AURORA, IL 60504						

#### **Signatures**

Amy T. Forster, by power of attorney	01/04/2005
**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).
- (1) Options vest in equal installments on the first four anniversaries of the option grant.

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.