

COLUMBUS MCKINNON CORP  
 Form 4  
 October 27, 2009

**FORM 4**

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

OMB APPROVAL

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Check this box if no 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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
**HARVEY TIMOTHY R**

2. Issuer Name and Ticker or Trading Symbol  
**COLUMBUS MCKINNON CORP [CMCO]**

5. Relationship of Reporting Person(s) to Issuer  
 (Check all applicable)  
 \_\_\_ Director \_\_\_ 10% Owner  
 Officer (give title below) \_\_\_ Other (specify below)  
 General Counsel

(Last) (First) (Middle)  
**140 JOHN JAMES AUDUBON PARKWAY**  
 (Street)  
**AMHERST, NY 14228**  
 (City) (State) (Zip)

3. Date of Earliest Transaction (Month/Day/Year)  
**10/27/2009**

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 \_\_\_ Form filed by More than One Reporting Person

**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, if any (Month/Day/Year)	3. Transaction Code (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)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock				(A) or (D)	4,143	D	
Common Stock	10/27/2009		S	1,000	D \$ 17 3,143	D	
Common Stock					1,455 <sup>(1)</sup>	D	
Common Stock					789,344	I	Additional shares held by ESOP; reporting

person is 1 of  
3 trustees;  
DISCLAIMS  
beneficial  
ownership.

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

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(9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned**  
(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	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)	Amount or Number of Shares
Non-Qualified Stock Options (Right to Buy)	\$ 28.45					05/19/2009 05/18/2018	Common Stock	1,289
Non-Qualified Stock Options (Right to Buy)	\$ 13.27					(3) 05/17/2019	Common Stock	3,678

## Reporting Owners

### Reporting Owner Name / Address

### Relationships

Director    10% Owner    Officer    Other

HARVEY TIMOTHY R  
140 JOHN JAMES AUDUBON PARKWAY  
AMHERST, NY 14228

General  
Counsel

## Signatures

Timothy R.                      10/27/2009  
Harvey

\_\_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) Reports shares allocated to account of reporting person under the Columbus McKinnon Corporation Employee Stock Plan, as amended (the "ESOP").
- (2) Exercisable 25% per year for four years, beginning 5/19/09, subject to IRS limitations.  
Represents non-qualified stock options issued to reporting person under the Columbus McKinnon Corporation 2006 Long Term Incentive
- (3) Plan dated as of May 4, 2006; options become exercisable 25% per year for four years beginning 5/18/2010, if reporting person remains an employee of issuer.

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.