

COLUMBUS MCKINNON CORP
 Form 3
 August 05, 2015

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2015
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF 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 *

Â AuYeung Benjamin
 (Last) (First) (Middle)

140 JOHN JAMES AUDUBON PARKWAY

(Street)

AMHERST, NY 14228

(City) (State) (Zip)

2. Date of Event Requiring Statement

(Month/Day/Year)
 07/27/2015

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

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer Other
 (give title below) (specify below)
 VP-APAC

5. 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 Beneficially Owned

1. Title of Security (Instr. 4)

2. Amount of Securities Beneficially Owned (Instr. 4)

3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)

4. Nature of Indirect Beneficial Ownership (Instr. 5)

Common Stock

4,429.5659 ⁽¹⁾

D Â

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

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and Expiration Date (Month/Day/Year)

3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

Title

4. Conversion or Exercise Price of Derivative Security

5. Ownership Form of Derivative Security: Direct (D)

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Edgar Filing: COLUMBUS MCKINNON CORP - Form 3

	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Non-Qualified Stock Options (Right to Buy)	05/20/2014	05/20/2023	Common Stock	1,184 ⁽²⁾	\$ 18.95	D	Â
Non-Qualified Stock Options (Right to Buy)	05/19/2015	05/19/2024	Common Stock	1,874 ⁽³⁾	\$ 27.12	D	Â
Non-Qualified Stock Options (Right to Buy)	05/18/2016	05/18/2025	Common Stock	8,983 ⁽⁴⁾	\$ 24.94	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
AuYeung Benjamin 140 JOHN JAMES AUDUBON PARKWAY AMHERST, NY 14228	Â	Â	Â VP-APAC	Â

Signatures

Mary C. O'Connor, Power of Attorney for Benjamin AuYeung 08/05/2015

**Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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) Includes 3961.5659 shares of restricted stock issued to reporting person subject to forfeiture in whole or part; 283.1459 shares become fully vested and non-forfeitable 50% per year for two years beginning 5/20/2016, 558.420 shares become fully vested and non-forfeitable 33.33% per year for three years beginning 5/19/2016, and the remaining 3120 shares become fully vested and non-forfeitable 25% per year for four years beginning 5/18/2016, if reporting person remains an employee of issuer.
- (2) Exercisable 25% per year for four years beginning 5/20/2014, if reporting person remains an employee of issuer.
- (3) Exercisable 25% per year for four years beginning 5/19/2015, if reporting person remains an employee of issuer.
- (4) Exercisable 25% per year for four years beginning 5/18/2016, 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.