## Edgar Filing: RABINOWITZ STEPHEN - Form 4

RABINOWIT Form 4 February 21, 2											
FORM	4								OMB APPROVAL		
	UNITED S	STATES		ITIES AI hington, l			COMMISSION	OMB Number:	3235-0287		
Check this box								Expires:	January 31,		
subject to	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERS					<b>NERSHIP OF</b>	Estimated a	2005 average			
Section 16.	SECURITIES						burden hou	0			
Form 4 or							response	•			
Form 5 obligations	-						ge Act of 1934,				
may contin				•	<b>U</b> .		of 1935 or Sectio	n			
See Instruct 1(b).	tion	30(h)	of the Inv	estment (	Company	Act of 19	940				
(Print or Type Re	sponses)										
1. Name and Address of Reporting Person <u>*</u> RABINOWITZ STEPHEN			2. Issuer Name <b>and</b> Ticker or Trading Symbol COLUMBUS MCKINNON CORP				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			[CMCO]								
(Last)	) (First) (Middle) 3. Date of E			Earliest Transaction			X Director		itle 00% Owner		
205 CROSSPOINT PARKWAY			(Month/Day/Year) 02/20/2018				Officer (give below)	below)	er (specify		
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				h/Day/Year)	C		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
	(54-4-)	(7:)									
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecurities Ac	quired, Disposed o	f, or Beneficial	lly Owned		
	2. Transaction Dat (Month/Day/Year)	Execution any	med on Date, if Day/Year)		Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
Common Stock				Code V	Amount	(D) Price	42,266	D			

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

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

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

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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. Transactic Code (Instr. 8)	5. Number of orDerivative 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	(1) (2)	02/20/2018		А	0.4189	(3)	(3)	Common Stock	382.2019
Restricted Stock Units	<u>(1)</u> <u>(2)</u>	02/20/2018		А	0.8378	<u>(4)</u>	<u>(4)</u>	Common Stock	757.0752
Restricted Stock Units	<u>(1)</u> <u>(2)</u>	02/20/2018		А	1.6756	(5)	(5)	Common Stock	1,503.496

## **Reporting Owners**

Reporting Owner Name / Address	Director	10% Owner	Officer	Other
RABINOWITZ STEPHEN 205 CROSSPOINT PARKWAY GETZVILLE, NY 14068	X			
Signatures				
Mary C. O'Connor, Power of Atto Rabinowitz	rney for S	tephen		02/21/2018

\*\*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) Each restricted stock unit represents a contingent right to receive one (1) share of Columbus McKinnon Corporation common stock.
- (2) Represents additional restricted stock units attributable to dividend reinvestment.
- (3) Subject to forfeiture, units become fully vested on July 27, 2018, if reporting person remains a director of issuer.
- (4) Subject to forfeiture, units become fully vested and non-forfeitable 50% on July 18, 2018 and 50% on July 18, 2019, if reporting person remains a director of issuer.
- (5) Subject to forfeiture, units become fully vested and non-forfeitable 50% on July 24, 2018, 25% on July 24, 2019 and 25% on July 24, 2020, if reporting person remains a director 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.