Edgar Filing: GRIFFON CORP - Form 4

GRIFFON C Form 4											
May 24, 200 FORN Check the if no long subject to Section 1 Form 4 co Form 5 obligation may com <i>See</i> Instri 1(b).	1 4 UNITED S is box ger o 16. or Filed purs Section 17(a)	ENT OF Suant to S	Was CHAN ection 10 Public Ut	Shington, GES IN SECUR 6(a) of the	D.C. 20 BENEF ITIES e Securit ling Con	549 ICIA ies E	LOWN Exchange y Act of	OMMISSION NERSHIP OF e Act of 1934, 1935 or Section 0	OMB Number: Expires: Estimated a burden hou response	•	
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> ALPERT HENRY A			2. Issuer Name and Ticker or Trading Symbol GRIFFON CORP [GFF]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Mo			3. Date of (Month/D 05/20/20	-	ansaction			Officer (give title Other (specify below) below)			
				ndment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	ied Date, if	3. Transactic Code (Instr. 8) Code V	4. Securi m(A) or Di (Instr. 3,	ties A ispose	cquired d of (D)	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	
Common Stock								7,447	D		
Common Stock	05/20/2005			А	100	А	\$ 19.51	16,500	Ι	Spartan Pension Plan	
Common Stock	05/20/2005			A	900	А	\$ 19.58	17,400	Ι	Spartan Pension Plan	
Common Stock	05/20/2005			А	1,500	A	\$ 19.6	18,900	Ι	Spartan Pension Plan	

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Common				¢			Spartan
Common	05/20/2005	А	7,500 A	φ	26,400	T	Pension
Stock	05/20/2005	1 1	7,500 11	19.65	20,100	-	i chistoni
STOCK				19.05			Plan

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

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 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)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate Ame Year) Und Secu		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	dress Relationships							
	Director	10% Owner	Officer	Other				
ALPERT HENRY A 19 FOX HOLLOW LANE OLD WESTBURY, NY 11768	Х							
Signatures								
/s/Henry A. 05/ Alpert	05/24/2005							
<u>**</u> 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).

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.