## Edgar Filing: MCCORMICK PETER M - Form 4

MCCORMIC	CK PETER M										
Form 4											
November 21	, 2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	UNITED	STATES			D.C. 2054		GE C	OMMISSION	OMB Number:	3235-0287	
Check thi if no long	or					Expires:	January 31, 2005				
subject to STATEMENT OF CHAN				IGES IN BENEFICIAL OWNERSHI SECURITIES					Estimated a		
Section 16. Form 4 or				SECUR	TIES				burden hours per		
Form 5		rsuant to S	Section 1	6(a) of th	e Securitie	es Exc	change	e Act of 1934,	response	0.5	
obligation	<sup>18</sup> Section 17						•	1935 or Section	1		
may conti <i>See</i> Instru	nue.				Company						
1(b).											
(Print or Type R	esponses)										
MCCORMICK PETER M Symbol				suer Name <b>and</b> Ticker or Trading ol JUMBUS MCKINNON CORP				5. Relationship of Reporting Person(s) to Issuer			
			[CMCO	]				(Check all applicable)			
(Last)	(First) (	Middle)	3. Date of	Earliest Tr	ansaction			Director		Owner	
			onth/Day/Year)				X Officer (give below)	r (specify			
205 CROSSPOINT PARKWAY 11/19/2				2018				VP-CraneSolutions			
			mendment, Date Original /onth/Day/Year)				6. Individual or Joint/Group Filing(Check				
							Applicable Line) _X_ Form filed by One Reporting Person				
GETZVILLI	E, NY 14068							_X_Form filed by C Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative Se	curiti	es Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	on Date 2A. Deemed //Year) Execution Date, if any (Month/Day/Year)		3.4. Securities AcquiredTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5)(Instr. 8)			of (D)	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I)		
				Code V	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)	
Common Stock	11/19/2018			A	22.9322 ( <u>1)</u>	A	\$ 0	67,151.283 (2)	D		

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,			Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
MCCORMICK PETER M 205 CROSSPOINT PARKWAY GETZVILLE, NY 14068			VP-CraneSolutions					
Signatures								
Peter M. McCormick 11/20/	2018							

<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).
- (1) Represents additional restricted stock units attributable to dividend reinvestment.

Includes 12,699.2830 shares of restricted stock issued to reporting person subject to forfeiture in whole or part; 3,350.2278 shares become fully vested and non-forfeitable 50% per year for two years beginning 5/23/2019; 3,643.1299 shares become fully vested and

(2) non-forfeitable 33.33% per year for three years beginning 5/22/2019; 3,022.0270 shares become fully vested and non-forfeitable 25% per year for four years beginning 5/22/2019; and the remaining 2,683.8983 shares become fully vested and non-forfeitable on 11/13/2019, 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.