FORM	4
------	---

Г

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)											
1. Name and Address of Reporting Person <sup>*</sup> – Condame Jennifer R		2. Issuer Name <b>and</b> Ticker or Trading Symbol GRAHAM CORP [GHM]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last) (First) C/O GRAHAM CORPORATION, 2 FLORENCE AVENUE	• •	3. Date of Earliest Transaction (Month/Day/Year) 05/05/2022						X Officer (give title below) Other (specify below) CAO and Controller			
(Street) BATAVIA, NY 14020	4	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)Form filed by One Reporting PersonForm filed by More than One Reporting Person			
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquiration						uired, Disposed of, or Beneficially Owned			
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	3. Transact Code (Instr. 8) Code		(A) or Di	(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
Common Stock	05/05/2022		D		1,548 (1)	D	\$0	29,342	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 SEC 1474 (9-02) 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	2.	3. Transaction	3A. Deemed	4.		5.	6. Date Exercisable and		7. Title and Amount 8. P		8. Price of	9. Number of	10.	11. Nature	
Derivative	Conversion	Date	Execution Date, if	Transac	tion	Num	Number Expiration Date		of Underlying Derivat		Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)		Code		of		(Month/Day/Y	ear)	Securities Security		Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	)	Deriv	ative			(Instr. 3 and 4)		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secu								-	(Instr. 4)
	Security					Acqu							0	Direct (D)	
						(A) 0							or Indirect		
						Dispo						Transaction(s)	· · /		
						of (D (Instr	· · · · · · · · · · · · · · · · · · ·				(Instr. 4)	(Instr. 4)			
						4, and									
						<i>ч</i> , ан	15)								
											Amount				
								Date	Expiration	T'4	or				
								Exercisable	Date	Title	Number of				
				Code	v	(A)	(D)				Shares				
				Coue	v	(21)	(D)				Shares				
Stock															
Option	\$ 18.65							05/30/2015	05/20/2022	Common	3,127		2 1 2 7	D	
(Right	\$ 18.05							03/30/2013	03/30/2022	Stock	3,127		3,127	D	
to Buy)															
to Duj)															

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Condame Jennifer R C/O GRAHAM CORPORATION 20 FLORENCE AVENUE BATAVIA, NY 14020			CAO and Controller				

## Signatures

/s/ Jennifer R. Condame	05/05/2022
Signature of Reporting Person	Date

# **Explanation of Responses:**

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Shares forfeited under the terms of Ms. Condame's May 29, 2019 performance-vested restricted stock award.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4(b)(v).