FORM 4

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

OMB APPROV	/AL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 Ty	pe Response	5)													
1. Name and Address of Reporting Person* BERKELEY HELEN H			2. Issuer Name and Ticker or Trading Symbol GRAHAM CORP [GHM]							. Relationshi _X Director		ing Person(s) k all applicab			
(Last) (First) (Middle) C/O GRAHAM CORPORATION, 20 FLORENCE AVENUE			20	3. Date of Earliest Transaction (Month/Day/Year) 05/29/2008						-	Officer (gi	ve title below)	Oth	er (specify belo	ow)
(Street)				4. If Amendment, Date Original Filed(Month/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				
BATAV (City	IA, NY 14	(State)	(Zip)			F.1.1.	I. N D.				- I D'	1 . C D			
		. ,		24 D				1			•		eficially Owi		7.31.4
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Year		Code (Inst		4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		of (D) O Ti				6. Ownership Form: Direct (D)	Beneficial Ownership	
						C	ode V	Amount	(A) or (D)	Price		,		or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock									1	63,430 ⁽¹⁾			D	
Reminder:	Report on a s	separate fine for eac	ir class of securities				cont	ained in t	his for	m are no	t required		d unless th		1474 (9-02)
Reminder:	Report on a s	separate fine for each	Table II -	Derivativ	e Securit	ies Ac	cont form quired, Di	ained in the displays sposed of,	his for a curr or Ben	m are no ently val	ot required id OMB co		d unless th		1474 (9-02)
	2. Conversion	3. Transaction	Table II -	Derivativ (e.g., puts 4. Transact Code	e Securit, calls, w 5. Num of Deri Secu	ies Acarrant ber vative rities prosed or osed or r. 3,	cont form quired, D	ained in the displays sposed of, convertible tercisable at Date	his for a curr or Ben le secur	m are no ently val eficially (rities)	ot required lid OMB co Owned and Amount lying	to respondentrol number 8. Price of	d unless th	f 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - (3A. Deemed Execution Date, if	Derivativ (e.g., puts 4. Transact Code	e Securit, calls, w. 5. Sum of Deri Securit Acq (A) Disp of (I (Inst	ber vative rities nired oor oosed (b)	quired, Diss, options. 6. Date E Expiratio	eined in the displays sposed of, convertible are cisable and Date ay/Year) Expirati	his for a curr or Ben le secun and	eficially Crities) 7. Title ar of Underl Securities	ot required lid OMB co Owned and Amount lying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transactions	f 10. Ownersl Form of Derivati Security Direct (l or Indirects)	11. Natur of Indirec Beneficia Ownershi (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BERKELEY HELEN H C/O GRAHAM CORPORATION 20 FLORENCE AVENUE BATAVIA, NY 14020	X					

Signatures

/s/ Carole M. Anderson, Attorney-in-fact for Helen H. Berkeley	06/02/2008
**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) Adjusted to reflect a 5-for-4 stock split in the nature of a stock dividend paid on 1/3/08.
- (2) This option was granted under the Amended and Restated 2000 Graham Corporation Incentive Plan to Increase Shareholder Value in a transaction exempt under Rule 16b-3 and is exercisable pro rata on the first, second, third and fourth anniversaries of the grant date.

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.