FORM 4

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

OMB APPROVAL
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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	s)														
1. Name and Address of Reporting Person* MAZURKIEWICZ GERARD T				2. Issuer Name and Ticker or Trading Symbol GRAHAM CORP [GHM]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X Director 10% Owner					
(Last) (First) (Middle) C/O GRAHAM CORPORATION, 20 FLORENCE AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 11/17/2008						_	Officer (gi	ve title below)	Ot	her (specify bel	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					
BATAVIA, NY 14020 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqu						es Acquire	lired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if		(Instr. 8)		(A) or	4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)) .		7. Nature of Indirect Beneficial		
				(WOHUI/I	<i>Дау</i> /	i eai)	Co	ode V	Amour	(A) or		isti. 3 and 4	u. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	n Stock		11/17/2008]	P	1,500	A	\$ 9.84 1,	1,500			D	
Derivative Conversion D		3. Transaction Date (Month/Day/Year)	(e.g., puts, calls 4. 5 if Transaction N Code o r) (Instr. 8) E S A		1s, warrants, 5. 6 Number E		Expiration Date of (Month/Day/Year) Se		rently vali neficially O urities) 7. Title and of Underly Securities	ntly valid OMB conticially Owned ties) Title and Amount of Underlying		9. Number of Derivative Securities Beneficially Owned Following Reported	of 10. Ownersl Form of Derivati Security Direct (I or Indire	Ownership (Instr. 4)		
						of (D										ect
						(Instr 4, and	. 3,					Amount		Reported Transaction (Instr. 4)		
				Code	V	(Instr	. 3, d 5)	Date Exercisa	Expii Date	ration	Title	Amount or Number of Shares		Transaction	(s) (I)	
Stock Option (Right to Buy)	\$ 12.52 (1)			Code	V	(Instr 4, and	. 3, d 5)		ole Date	ation 5/2017	Title Common Stock	or Number of Shares		Transaction	(s) (I) (Instr. 4	

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
MAZURKIEWICZ GERARD T C/O GRAHAM CORPORATION 20 FLORENCE AVENUE BATAVIA, NY 14020	X						

Signatures

/s/ Gerard T. Mazurkiewicz	11/19/2008
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).
- This option was previously reported by Mr. Mazurkiewicz and is exercisable pro rata on the first, second, third and fourth anniversaries of the 8/15/07 grant date. The number of shares (1) subject to the option and the exercise price have been adjusted to reflect a 5-for-4 stock split in the nature of a stock dividend paid on 1/3/08, and a 2-for-1 stock split in the nature of a stock dividend paid on 1/3/08.
- (2) This option was previously reported by Mr. Mazurkiewicz and is exercisable pro rata on the first, second, third and fourth anniversaries of the 5/29/08 grant date. The number of shares subject to the option and the exercise price have been adjusted to reflect a 2-for-1 stock split in the nature of a stock dividend paid on 10/6/08.

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.