

(Print or Type Responses)

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

OMB APPROVAL					
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#### INITIAL STATEMENT OF 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

1. Name and Address of Reporting Person* Rice Lisa D.	2. Date of Event Requiring Statement (Month/Day/Year) 12/14/2010		3. Issuer Name and Ticker or Trading Symbol GRAHAM CORP [GHM]					
(Last) (First) (Middle) C/O GRAHAM CORPORATION, 20 FLORENCE AVENUE	12/14/201	10				File		ndment, Date Original h/Day/Year)
BATAVIA, NY 14020				Officer (give title X_ Other (specify			5. 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)		Table I - Non-Derivative Securities Beneficially Owned						
1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)  3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)  4. Nature of Indirect Beneficial Ownership (Instr. 5)					ct Beneficial Ownership		
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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security	. Date Exercisable 3. Title and A		<u> </u>	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Direct	ship e Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable Date	xpiration ate	Title Amor	unt or Number of	Security	(D) or Indirect (I) (Instr. 5)		
Reporting Owners								

	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Rice Lisa D. C/O GRAHAM CORPORATION 20 FLORENCE AVENUE BATAVIA, NY 14020				President of Subsidiary

### **Signatures**

/s/ Lisa D. Rice	12/15/2010
**Signature of Reporting Person	Date

## **Explanation of Responses:**

#### No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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.