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 Responses	s)														
Name and Address of Reporting Person * Smith Alan E				2. Issuer Name and Ticker or Trading Symbol GRAHAM CORP [GHM]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
		(First) ORPORATION, NUE		3. Date of 03/04/2		t Tran	isact	tion (Month	/Day/Y	ear)		X Officer (g	VP	of Operation	her (specify be	low)
(Street) BATAVIA, NY 14020				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				
(City		(State)	(Zip)			Tabl	le I	- Non-Deri	vative S	Securiti	es Acquire	d, Dispose	d of, or Ben	eficially Ow	ned	
1.Title of S	ecurity		2. Transaction	2A. Deer	ned					ties Acc				Beneficially		7. Nature
(Instr. 3) Date (Month/Day/Year)					(In	(Instr. 8)		(A) or Disposed of (Instr. 3, 4 and 5)) T	Transaction(s)		Ownership Form: Direct (D)	of Indirect Beneficial Ownership		
						Code V		Amount	(A) or (D)	Price			or Indirect (I) (Instr. 4)	(Instr. 4)		
Common Stock 03/04/2011			03/04/2011				S	3	25 (1)	D	\$ 20.85 6	,538			D	
Reminder:	Report on a s	separate line for eac	h class of securities	beneficia	lly owr	ed dire	ectly	y or indirect	ly.							
								contai	ned in	this fo	rm are no	t required		d unless th		1474 (9-02)
			Tabla II	Dorivatio	o Soon	ritios /	A 00	torm a			•		ontrol num	ber.		
	1						nts	, options, c	onverti	ble secu		Wileu				
1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/Year)		Section Acq (A) Displayed (Ins		erivativ	Expiration (Month/I (Date ay/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	Ownersh (Instr. 4) D) ect
				Code	V (A	Α) (Ε		Date Exercisable	Expira Date	tion	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$ 10.84							(2)	07/26	5/2017	Commo: Stock	n 3,750 (2)		3,750 (2	D D	
Stock Option (Right to Buy)	\$ 30.875							(3)	05/29	0/2018	Commo	n 1,114		1,114 (3	D D	
Stock Option (Right to Buy)	\$ 15.22							(4)	05/28	3/2019	Commo: Stock	n 3,571		3,571 ⁽⁴) D	
Stock Option	\$ 15.25							<u>(5)</u>	05/20)/2020	Commo: Stock	n 3,118		3,118 <u>(5</u>	D D	

Reporting Owners

	Relationships
Reporting Owner Name / Address	

	Director	10% Owner	Officer	Other
Smith Alan E C/O GRAHAM CORPORATION 20 FLORENCE AVENUE BATAVIA, NY 14020			VP of Operations	

Signatures

/s/ Alan E. Smith	04/01/2011
**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) These shares were acquired under the Graham Corporation Employee Stock Purchase Plan.
- (2) This option was previously reported by Mr. Smith and is exercisable pro rata on the first, second, third and fourth anniversaries of the 7/26/07 grant date.
- (3) This option was previously reported by Mr. Smith and is exercisable pro rata on the first, second, third and fourth anniversaries of the 5/29/08 grant date.
- (4) This option was previously reported by Mr. Smith and is exercisable 33 1/3% per year over three years beginning on the first anniversary of the 5/28/09 grant date.
- (5) This option was previously reported by Mr. Smith and is exercisable 33 1/3% per year over three years beginning on the first anniversay of the 5/20/10 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.