Edgar Filing: MANITOWOC CO INC - Form 4

MANITOW	OC CO INC						
Form 4	• • • • •						
October 03,							
FORM	14 UNITED	STATES SECI	RITIES AND EXCHANGE C	OMMISSION		PROVAL	
	UNITED		ashington, D.C. 20549		OMB Number:	3235-0287	
Check t	his box	•••	asinington, D.C. 20347		Expires:	January 31,	
if no lor		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF				2005	
subject Section	10	SECURITIES				Estimated average burden hours per	
Form 4						0.5	
Form 5	Filed put	rsuant to Section	16(a) of the Securities Exchange	e Act of 1934,	·		
obligati may cor			Utility Holding Company Act of				
See Inst		30(h) of the l	investment Company Act of 194	0			
1(b).							
(Print or Type	Responses)						
(I mit of Type	(csponses)						
1. Name and	Address of Reporting	Person <u>*</u> 2. Issu	er Name and Ticker or Trading	5. Relationship of H	Reporting Perso	on(s) to	
ANDERSON DEAN H Symb				Issuer			
			TOWOC CO INC [MTW]	(Check all applicable)			
(Last)	(First) (Middle) 3. Date	of Earliest Transaction	(Check	an applicable)		
(/Day/Year)	X Director 10% Owner			
2400 SOU	TH 44TH STREE	T 09/29/	2006	Officer (give ti below)	tle Other below)	(specify	
(Street) 4. If Amendment, Filed(Month/Day/Y			andment. Date Original	, , , , , , , , , , , , , , , , , , , ,			
			-	6. Individual or Joint/Group Filing(Check Applicable Line)			
				X Form filed by Or	y One Reporting Person		
MANITOW	WOC, WI 54221-0)066		Form filed by Mo Person	ore than One Rep	oorting	
(City)	(State)	(Zip) Ta				. .	
(eng)	· · ·	- 14	ble I - Non-Derivative Securities Acqu		or Beneficially		
1.Title of	2. Transaction Date		3. 4. Securities Acquired (A)		6. Oumanshin	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any	Transaction Disposed of (D) Code (Instr. 3, 4 and 5)	Securities Beneficially	Ownership Form:	Indirect Beneficial	
((Month/Day/Year)	(Instr. 8)	Owned	Direct (D)	Ownership	
				Following	or Indirect	(Instr. 4)	
			(A)	Reported Transaction(s)	(I) (Instr. 4)		
			or Code V Amount (D) Price	(Instr. 3 and 4)			
Common			\$	33,467.9195			
Stock	09/29/2006		A 0.0166 A $\frac{\phi}{44.3398}$		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 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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(Instr. 3, 4, and 5) (A) (D)		Expiration Date	Title Amoun or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships			
reporting of her rante (reactors	Director	10% Owner	Officer	Other
ANDERSON DEAN H 2400 SOUTH 44TH STREET MANITOWOC, WI 54221-0066	Х			
Signatures				
Maurice D. Jones, Power of Attorney	1	10/03/2006		
<u>**</u> Signature of Reporting Person		Date		
Fundamentian of Deensmoore				

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) Includes amount and purchase price of common stock units acquired in an exempt transaction pursuant to dividend reinvestment provisions of the Deferred Compensation Plan.

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.