JONES MAURICE D Form 4 July 22, 2008

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

January 31, Expires: 2005

Form 4 or Form 5 obligations STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person *

JONES M	IAURICE D	Sy	mbol ANITOWO			Iss	suer (Chack of	all applicable)	(6) 16		
(Last) (First) (Middle) 2400 S. 44TH STREET			3. Date of Earliest Transaction (Month/Day/Year) 07/18/2008				(Check all applicable) Director 10% Owner Officer (give title below) SVP, General Counsel and Secre				
	(Street)		If Amendment, led(Month/Day/Y	_	ıl	. Individual or Joint/Group Filing(Check pplicable Line) X_ Form filed by One Reporting Person					
MANITO	WOC, WI 54220					Pe	_ Form filed by Morerson	e than One Rep	orting		
(City)	(State)	(Zip)	Table I - Noi	n-Derivative	Secur	ities Acquir	ed, Disposed of, o	r Beneficially	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dat any (Month/Day/Y	Code	iorDisposed c (Instr. 3, 4	of (D)	uired (A) or Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock							3,820.4567 (1)	I	RSVP 401k Plan		
Common	07/18/2008		A	41.7525	A	\$ 0805	33,918.5073	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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28.0895

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A manust		
									Amount		
						Date Exercisable	Expiration Date				
									Number		
				C-1- V	(A) (D)				of		
				Coue v	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Officer 10% Owner Other Director

JONES MAURICE D 2400 S. 44TH STREET MANITOWOC, WI 54220

SVP. General Counsel and Secre

Signatures

Maurice Jones 07/22/2008 **Signature of Date Reporting Person

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).

Consists of shares held under the company's 401(k) plan, (The Manitowoc company, Inc. RSVP Profit Sharing Plan), including 175.4901 shares acquired in transactions ocurring between 12/31/06 and 12/31/07, which are exempt from Section 16(b) pursuant to Rule 16b-3

(1) and exempt from reporting pursuant to Rule 16a-3(f)(1)(i)(B). The information in this report is based on a plan statement dated as of 12/31/07. From time to time the plan administrator collects maintenance fees related to the RSVP Plan, which may result in the number of shares held by a participant in the RSVP Plan declining by a marginal amount.

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.

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