Edgar Filing: MANITOWOC CO INC - Form 4

MANITOW	OC CO INC										
Form 4											
June 14, 200	5										
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
		ND EXCHANGE COMMISSION D.C. 20549			OMB Number:	3235-0287					
Check th if no long subject to Section 1	ser STATEN 6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									
Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	Filed pur ^{ns} Section 17(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									
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> MUSIAL THOMAS G			2. Issuer Name and Ticker or Trading Symbol MANITOWOC CO INC [MTW]				5. Relationship of Reporting Person(s) to Issuer				
(Lost)	(First)						(Check all applicable)				
(Last) (First) (Middle) 2400 SOUTH 44TH STREET			3. Date of Earliest Transaction (Month/Day/Year) 06/10/2005				Director 10% Owner X Officer (give title Other (specify below) below) below) Sr. VP Human Resources				
	(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				
MANITOW	VOC, WI 54221-0	066					Form filed by M Person				
(City)	(State)	(Zip)	Table I - No	on-Derivative	Secur	ities Acq	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		ate, if Transa Code	4. Securi action(A) or Di (Instr. 3, 8)	sposed	l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common	0611010005		Code		(D)	Price \$	(Instr. 3 and 4) 21,695.5821	D			
Stock	06/10/2005		А	3.5964	А	41.18	<u>(1)</u>	D			
Common Stock							5,151.4905 <u>(2)</u>	Ι	RSVP 401k Plan		

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

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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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
i o	Director	10% Owner	Officer	Other				
MUSIAL THOMAS G 2400 SOUTH 44TH STREET MANITOWOC, WI 54221-0066			Sr. VP Human Resources					
Signatures								
Maurice D. Jones, by Power of Attorney		06/14/20	05					
**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) Includes amount and price of shares acquired in exempt transactions pursuant to a Shareholder Dividend Reinvestment Plan.

Consists of shares held under the Company's 401(k) plan, The Manitowoc Company, Inc. RSVP Profit Sharing Plan, including 29.7605 shares acquired in transactions occurring between 12/31/03 and 12/31/04, which are exempt from Section 16(b) pursuant to Rule 16b-3

(2) 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 12/31/04. 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.