| Altra Holdin Form 4 February 14, | - | | | | | | | | | |
|---|---|---|---|------------------------|----------------|---|---|--|--------------|--|
| FORM | 1 / | | | | | | | OMB AF | PPROVAL | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE Washington, D.C. 20549 | | | | | | | | | 3235-0287 | |
| Check thi if no long subject to Section 1 Form 4 o Form 5 | S | F CHANGES IN BENEFICIAL OWNER SECURITIES Section 16(a) of the Securities Exchange Act | | | | | Expires: Estimated a burden hou response | | | |
| obligation may cont <i>See</i> Instru 1(b). | ns inue. action Section 17(a) of the 30 | | lity Hold | ling Con | ipan | y Act of | 1935 or Section | n | | |
| (Print or Type F | Responses) | | | | | | | | | |
| 1. Name and Address of Reporting Person 2. IssuerCARPENTER EDMUND MSymbol | | | l | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | Altra Hol | Altra Holdings, Inc. [AIMC] | | | | (Check all applicable) | | | |
| (Last) 123 MAIN S | 3. Date of E (Month/Day 02/07/200 | | | | | title 10% Owner Other (specify below) | | | | |
| | | | endment, Date Original onth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) | | | |
| BRISTOL, CT 06011 | | | | , , | | _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (State) (Zip) | Table | I - Non-D | erivative | Secur | ities Aca | uired, Disposed of | or Beneficial | lv Owned | |
| 1.Title of Security (Instr. 3) | 1.Title of2. Transaction Date2A. DeemedSecurity(Month/Day/Year)Execution Date, if | | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) | | | | 5. Amount of Securities Beneficially Owned | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of | |
| Common Stock, par value \$0.001 | 02/07/2008 | (| Code V A | Amount 4,415 (1) | or (D) A | Price \$ 13.59 | (Instr. 3 and 4) 7,741 | 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)

Reporting Owners

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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) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Under Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna 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 | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | |
| CARPENTER EDMUND M 123 MAIN ST P O BOX 489 BRISTOL, CT 06011 | Х | | | | | | |
| Signatures | | | | | | | |
| Todd Patriacca, Attorney-in-Fact | 02 | 2/14/2008 | | | | | |

**Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

** 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 are restricted common stock, par value \$0.001 ("Restricted Common Stock"), awarded to the Reporting Person under the Altra Holdings, Inc. 2004 Equity Incentive Plan, as amended. Shares of the Restricted Common Stock are subject to restrictions. The restrictions will expire in equal installments on September 1, 2008, September 1, 2009, September 1, 2010 and September 1, 2011, respectively.

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.