Edgar Filing: McPherson Larry - Form 4

McPherson L	Larry										
Form 4											
February 05,	2009								<u></u>		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL				
	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check thi if no long subject to Section 1 Form 4 or Form 5	er STATE 6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								January 31, 2005 average irs per 0.5	
Form 5 obligations may continue. See Instruction 1(b). 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 R	lesponses)										
1. Name and Address of Reporting Person <u>*</u> McPherson Larry			2. Issuer Name and Ticker or Trading Symbol Altra Holdings, Inc. [AIMC]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				(Chec	(Check all applicable)			
C/O MEDICAL STAFFING NETWORK HOLDINGS, 901 YAMATO ROAD, SUITE 110			(Month/Day/Year) 02/03/2009					X_ Director 10% Owner Officer (give title Other (specify below) below)			
				Amendment, Date Original Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
BOCA RATON, FL 33431								Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ities Acc	uired, Disposed of	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution D		n Date, if Transaction(A) or Disposed of Code (D)			Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common				Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)			
stock, par value \$0.001	02/03/2009			А	8,646 (1)	А	\$ 6.94	105,470	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.

Edgar Filing: McPherson Larry - Form 4

 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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 / Ad	Reporting Owner Name / Address		Relationships						
reporting o micr rune, rear as		Director	10% Owner	Officer	Other				
McPherson Larry C/O MEDICAL STAFFING NETWORK HOLDINGS 901 YAMATO ROAD, SUITE 110 BOCA RATON, FL 33431									
Signatures									
Todd Patriacca, Attorney-in-fact	02/05/2009								

Date

<u>**</u>Signature of 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).
- (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. The shares are fully vested on the 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.