FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person [*] HARRISON ROBERT G | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>GRIFFON CORP</u> [GFF] | | | | | | | | | | Relationsh neck all ap X Dire | plicable) | ng Person(s) t 10% | o Issuer Owner | |
|--|---|--|--------------------------------------|--|--|--|--|--|--|---|--------|--|---|----------------------|--|---|--|-------------------------|--|
| (Last) (First) (Middle) 9008 TILLMAN BETHEL RD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/06/2008 | | | | | | | | | Offi | cer (give title ow) | Othe | er (specify w) | |
| 9008 TILLMAN BETHEL RD (Street) | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Lin | ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person | | | | | | |
| · · | ENDERSON KY 42420 | | | | | | | | | | | | | | For | Form filed by More than One Reporting Person | | | |
| (City) | (S | ate) (ž | Zip) | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) Date (Month/Day | | | | y/Year) | Execution Date, | | | 3.4. SecurTransactionDisposeCode (Instr.and 5)8) | | | | | Secu | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (A (E | () or)) | Price | Repo Trans | | (1150.4) | (IIISU: 4) | |
| Common Stock 02/06/20 | | | | | 008 | | | | Α | | 935 | | A | \$ <mark>0</mark> (| 1) | 2,128 | D | | |
| | 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) | /Day/Year) Execution Date, if any | | | Fransaction Code (Instr. 3) | | mber ative rities ired . 3, 4 .) | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amoun of Title Shares | | str. ount iber | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4) | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4) | Beneficial Ownership | |

Explanation of Responses:

1. Grant under Company's Outside Director Stock Award Plan.

/s/ Robert G. Harrison

02/06/2008 Date

** Signature of Reporting Person

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

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.