GRIFFON CORP Form 3 May 12, 2016

FORM 3

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPROVAL

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SECURITIES

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 Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement **GRIFFON CORP [GFF]** GAMCO INVESTORS, INC. (Month/Day/Year) ET AL 05/04/2016 (Last) (First) (Middle) 5. If Amendment, Date Original 4. Relationship of Reporting Person(s) to Issuer Filed(Month/Day/Year) ONE CORPORATE (Check all applicable) CENTER.Â (Street) 6. Individual or Joint/Group __X__ 10% Owner Director Officer Other Filing(Check Applicable Line) (give title below) (specify below) Form filed by One Reporting RYE, NYÂ 10580 _X_ Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 1. Title of Security 2. Amount of Securities 3. 4. Nature of Indirect Beneficial Beneficially Owned (Instr. 4) Ownership Ownership (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) D (1) Â Common Stock 4,000 Common Stock Ι By: Gabelli Securities, Inc. (2) 5.019 By: MJG-IV Limited Partnership Common Stock 6,000 Ι (2) Common Stock 6,500 Ι By: Investment Partnership (2) Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. Persons who respond to the collection of

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

information contained in this form are not required to respond unless the form displays a

currently valid OMB control number.

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1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and 3. Title and Amount of **Expiration Date** (Month/Day/Year)

Securities Underlying **Derivative Security** (Instr. 4)

Conversion or Exercise Price of Derivative Security

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

6. Nature of Indirect Ownership Beneficial Ownership Form of (Instr. 5) Derivative

Expiration Date Exercisable Date

Amount or Title Number of

Shares

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
GAMCO INVESTORS, INC. ET AL ONE CORPORATE CENTER RYE, NY 10580	Â	ÂΧ	Â	Â
Associated Capital Group, Inc. ONE CORPORATE CENTER RYE, NY 10580	Â	ÂΧ	Â	Â
GABELLI MARIO J C/O GAMCO INVESTORS, INC ONE CORPORATE CENTER RYE, NY 10580	Â	ÂΧ	Â	Â
GGCP, INC. 140 GREENWICH AVENUE GREENWICH, CT 06830	Â	ÂX	Â	Â

Signatures

/s/ Douglas R. Jamieson, Attorney-In-Fact for MARIO J. GABELLI, GGCP, INC., and GAMCO INVESTORS, INC.

05/12/2016

**Signature of Reporting Person

Date

/s/ Kevin Handwerker, Executive VP, General Counsel & Secretary of ASSOCIATED CAPITAL GROUP, INC.

05/12/2016

**Signature of Reporting Person

Date

Explanation of Responses:

- If the form is filed by more than one reporting person, see Instruction 5(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 owned by Associated Capital Group, Inc.
 - GAMCO Investors, Inc. and Associated Capital Group, Inc. have less that a 100% interest in this entity; GGCP, Inc. has less than a 100% interest in GAMCO Investors, Inc. and Associated Capital Group, Inc.; and Mario J. Gabelli has less than a 100% interest in GGCP, Inc.
- (2) The amount of securities reported as beneficially owned reflects the total amount of securities held by this entity which is greater that the Reporting Persons' indirect pecuniary interests. The Reporting Persons hereby disclaim ownership of these securities in excess of their pecuniary interests.

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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