FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|---------------|-------------------|---------------|
| | 0. 0.17.11020 | III BEITEI IOI/TE | O TTTLE TOTAL |

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours ner resnonse: | 0.5 | | | | | | | | |

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

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* <u>Golden Michael F</u> | | | | | <u>S1</u> | 2. Issuer Name and Ticker or Trading Symbol SMITH & WESSON HOLDING CORP [SWHC] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|---|--|------------|-------------------------------|---|--|---|------------------|---|-------|-----------------------|--|---|---|--|---|-----------|---|-----------------------------------|--|
| (Last) 2100 RO | (F OSEVELT | First) | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/17/2009 | | | | | | | | | below) | (give title President | t and | Other (s below) CEO | specify | |
| (Street) SPRING | Street) SPRINGFIELD MA 01104 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| (City) | (5 | State) | (Zip) | | | | | | | | | | | | Person | | c trictri | One Repo | .u.ig | |
| | | Tak | le I - No | n-Deri | ivativ | e Se | curit | ties Ac | quired | , Dis | sposed o | | | | Owned | | | | | |
| ,,,,,, | | 2. Transaction Date (Month/Day/Year) | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | | | d (A) or r. 3, 4 a | nd 5) | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | • | Transaction(s) (Instr. 3 and 4) | | | | (| |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | M | | 25,000 |) A | \$1 | .47 | 411 | ,955 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 3,700 | D | \$5 | .37 | 408 | ,255 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 300 | D | \$5.3 | 3701 | 407 | ,955 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 5,300 | D | \$5 | .38 | 402 | ,655 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 1,200 | D | \$5.3 | 3801 | 401 | ,455 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 1,000 | D | \$5 | .39 | 400 | ,455 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 100 | D | \$5 | 5.4 | 400 | ,355 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 1,500 | D | \$5.4 | 4001 | 398 | ,855 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 1,900 | D | \$5 | .41 | 396 | ,955 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 2,700 | D | \$5 | .45 | 394 | ,255 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 2,300 | D | \$5 | .46 | 391 | ,955 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 1,500 | D | \$5.4 | 4601 | 390 | ,455 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 2,000 | D | \$5 | .47 | 388 | ,455 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 250 | D | \$5. | 475 | 388 | ,205 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 750 | D | \$5 | .48 | 387 | ,455 | | D | | |
| Common | Stock | | | 08/1 | 7/2009 | 9 | | | S ⁽¹⁾ | | 500 | D | \$5 | .52 | 386,955 | | | D | | |
| | | | Table II - | Deriv | ative | Sec | uritie | es Acq | uired, I | Disp | osed of, | or Ben | eficia | lly O | wned | | | | | |
| 1. Title of Derivative Convers | | 3. Transaction Date (Month/Day/Year) | | 3A. Deemed Execution Date, | | can action Instr. | on of | | 6. Date Exercis Expiration Date (Month/Day/Ye | | sable and | 7. Title and Amo | | unt 8. Price o | . Price of Perivative Security | 9. Numbe derivative Securities | e Owners | 10. Ownership Form: | 11. Nature of Indirect Beneficial | |
| Security (Instr. 3) | or Exercise Price of Derivative Security | , , , , , , , | (Month/Da | y/Year) | 8) | | Sec Acq (A) o Disp of (I | urities uired | | , | , | Underlying Derivative Sec (Instr. 3 and 4) | | urity (I | Instr. 5) | Beneficially Owned Following Reported Transaction(s (Instr. 4) | lly | Direct (D) or Indirect (I) (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amou or Numb of Share | er | | | | | | |
| Employee Stock Option (Right to Buy) | \$1.47 | 08/17/2009 | | | М | | | 25,000 | (2) | | 12/06/2014 | Common Stock | 25,00 | 00 | \$0.00 | 475,00 | 0 | D | | |
| Explanation | n of Respon | ses: | | | | | | | | | | | | | | | | | | |

- 1. The shares were sold pursuant to a 10b5-1 Sales Plan dated June 29, 2009.
- 2. 20% of the total number of options granted vested or shall vest and became or shall become exercisable on each of the first five anniversaries of the date of grant.

Remarks:

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.