FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

I	OMB APPROVAL										
l	OMB Number:	3235-0287									
l	Estimated average burden										
l	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

Name and Address of Reporting Person* Popoff Peter							2. Issuer Name and Ticker or Trading Symbol PARKER HANNIFIN CORP [PH] 3. Date of Earliest Transaction (Month/Day/Year)									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director					
(Last)	(First)	(Mi	iddle)			05/16/2013								X	Officer (give title below)			Other (specify below)			
PARKER-HANNIFIN CORPORATION																VP, President-Filtration Group					
6035 PARKLAND BOULEVARD						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)															X Form filed by One Reporting Person Form filed by More than One Reporting Person						
CLEVELAND	•														i omi med	a by More	ulail O	ne reporti	ig i cison		
(City)	(State)	(Zi	p)																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transi Date (Month/D						2A. Deemed Execution D Day/Year) if any (Month/Day/			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar				5. Amount of Securities Beneficially Ov Following Report Transaction(s)			Direct (D) rect (I) 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	ount (A)		Price	(Instr. 3 and 4)				(11150: 4)		
Common Stock															6,997.	927		I	Parker Retirement Savings Plan		
Common Stock 05/16						16/2013			S		3,989		D	\$96.98(1)	5,557			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)	tive Conversion Date Execution Date, ty (Instr. 3) or Exercise (Month/Day/Year) if any			4. Fransaction Code (Instr. 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		te Securities ear) Derivative		Title and A curities Un rivative Se str. 3 and 4	derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transact	e Owners s Form: Direct (I or Indire g (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
Fundamentian of De					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Titl	ile	Amount or Number of Shares		(Instr. 4)					

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$96.93 to \$97.03, inclusive. The reporting person undertakes to provide to Parker-Hannifin Corporation, any security holder of Parker-Hannifin Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote 1 to this Form 4.

Remarks:

Rhoda M. Minichillo, Attorney-in-Fact 05/16/2013

** Signature of Reporting Person Date

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.