SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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 [*] Ross Andrew D | | | | | | 2. Issuer Name and Ticker or Trading Symbol PARKER HANNIFIN CORP [PH] | | | | | | | | | 5. Relationship of Reporting (Check all applicable) Director | | | Person(s) to Issuer 10% Owner | | |
|--|---|-----|----------------------------------|--|--------------------------|--|---|--|---|------|--|-------------------|----------------------|-------------------------------------|--|---|--|--|---|--|
| (Last) | (First) | (Mi | | 3. Date of Earliest Transaction (Month/Day/Year) 08/05/2013 | | | | | | | | X | Officer (g below) | ive title | Other (specify below) | | specify | | | |
| PARKER-HANNIFIN CORPORATION | | | | | | | | | | | | | | | VP, Pres-Engineered Materials | | | | | |
| 6035 PARKLAND BOULEVARD | | | | | 4. If A | 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 OH 44124-4141 | | | | | | | | | | | | | | 1 OTTT IIIE | | | | ig r eison | | |
| (City) | (State) | (Zi | p) | | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| Date | | | | | te E onth/Day/Year) i | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar | | | | 5. Amount of Securities Beneficially Following R Transaction | Owned or Inc Reported (Instr | | Direct (D) rect (I) 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) or (D) Pri | | Price | (Instr. 3 and | | | | (| |
| Common Stock | | | | | | | | | | | | | | | 2,578.469 | | | I | Parker Retirement Savings Plan | |
| Common Stock 08/0: | | | | | 05/2012 | /2012 | | | F | | 146 | | D | \$105.47 | 1,230 | | | 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) | str. 3) 2. Conversion Date 3. Transaction Date Execution I (Month/Day/Year) if any Derivative Security (Month/Day/Security) | | ate, Transaction Code (Instr. | | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable Expiration Date (Month/Day/Year) | | te | Securities Unde | | derlying curity | ying Derivative | | er of e ss ally g d tion(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) (D) | | Date Exercis | able | Expiration Date | | | Amount or Number of Shares | | (Instr. 4) | | | | |
| Explanation of Re | sponses: | | | | | | | | | | | | | | | | | | | |

Remarks:

Rhoda M. Minichillo, Attorney-in-<u>08/06/2013</u> Fact

** 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.

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