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*  MAXWELL MARTIN C					2. Issuer Name <b>and</b> Ticker or Trading Symbol PARKER HANNIFIN CORP [ PH ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
		ORPORATION	liddle)		3. Dat 09/12			Transac	ransaction (Month/Day/Year)						Officer (give title below)		Other (speci below)		
6035 PARKLAND BOULEVARD						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					
(Street)	ОН	<b>4</b> 4	1124-414	I										X Form filed by One Reporting Person  Form filed by More than One Reporting Person					ng Person
(City)	(State)	(Zi	ip)																
		Ta	able I - N	on-Der	ivative	e Se	curiti	es Ac	quired	, Dis	sposed of	, or Bene	ficia	ally Ow	ned				
1. Title of Security (Instr. 3)			2. Transa Date (Month/D		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Di Of (D) (Instr. 3, 4 and 5)			isposed	Securities Beneficiall Following		6. Own Form: I or India (Instr. 4	Direct (D) rect (I)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	)	Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock														5,0/		03.2759		I	Parker Retirement Savings Plan
Common Stock				09/12/2017					M		9,750	A	\$	81.86	31,718			D	
Common Stock				09/12/2017					F		7,110	D	\$165.64		24,608		D		
Common Stock				09/12/2017					S		2,640	D \$165.674 <sup>()</sup>		5.674(1)	21,968		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	cise (Month/Day/Year) f ive	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amou Securities Underly Derivative Securit 3 and 4)		lying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	Owners Form: Direct ( or Indir	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	a		mount r umber f Shares		(Instr. 4)	(5)		
Stock Appreciation Right	\$81.86	09/12/2017			М			9,750	08/15/	2015	08/14/2022	Common Stock		9,750	\$0	0		D	

## 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 165.65 to 165.685, 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:

Kelley B. Standard, Attorney-in-

09/13/2017

<u>Fact</u>
\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.