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* Weeks Andrew M				2. Issuer Name and Ticker or Trading Symbol PARKER HANNIFIN CORP [PH]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) 6035 PARKLA	(First)	,	iddle)		3. Date of Earliest Transaction (Month/Day/Year) 04/22/2021								X	Officer (g below)	Officer (give title		Other (below)	specify
(Street) CLEVELAND (City)	OH (State)		44124 (Zip)				ent, Date of O	onth/Day/Y€		ndividual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person								
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date				Date	ransaction e nth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)			uired (A) (Instr. 3,		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	nount (A) or (D)		Price					(Instr. 4)
Common Stock 0				04/22	22/2021			A		6,614		Α	\$0	13,471		D		
Common Stock (04/22	/22/2021			F		2,618		D	\$317.6	10,853		D			
Common Stock														247.28		I		Parker Retirement Savings Plan and Savings Restoration Plan
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Exect (Month/Day/Year) if any			3A. Deemed Execution D if any (Month/Day)	ate, T	ransactio Code (Insti	n D S A o	. Number of derivative securities acquired (A) or Disposed of D) (Instr. 3, 4 and 5)	6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Am Securities Und Derivative Secu (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	re Owner es Form: ally Direct or Indi g (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V	(4	A) (D)	Date Exercis	sable	Expiration Date	Title		Amount or Number of Shares		(Instr. 4)		<u></u>	

Explanation of Responses:

Remarks:

Kelley B. Standard, Attorney-In-

04/26/2021

Fact
** Signature of Reporting Person

Data

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

- * 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.