FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-028 | | | | | | | |
| 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

| Name and Address of Reporting Person* Suever Catherine A | | | | | | 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) | (First) | ` | iddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 12/13/2012 | | | | | | | | | X | Officer (g below) | | | | . , |
| PARKER-HANNIFIN CORPORATION 6035 PARKLAND BOULEVARD | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 12/13/2012 | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| (Street) CLEVELAND | ОН | 44 | 124-4141 | | | | | | | | | | | | Form file | d by More | than C | ne Reportin | g Person |
| (City) | (State) | (Zi | p) | | | | | | | | | | | | | | | | |
| | | Та | ble I - Noı | n-Deri | ivativ | e Se | curitie | s Acq | uired, l | Disp | osed of, | or | Benefi | cially Ow | ned | | | | |
| Date | | | | | e Enth/Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | | ties Acquired (A) or I Of (D) (Instr. 3, 4 and | | | Following | ties cially Owned ing Reported | | nership : Direct (D) lirect (I) . 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common Stock 12/1 | | | | | 13/201 | 2 | | | S | | 777(1) |) | D | \$82.858 | 3,63 | | 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 | 3. Transaction Date (Month/Day/Year) | Execution Date, | | | 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) | | le and 7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4) | | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti | e s lly | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code V | | (A) | (D) | | | Expiration Date | Title | | Amount or Number of Shares | | (Instr. 4) | on(s) | | |

Explanation of Responses:

1. Due to a reporting error by the broker, the reporting person only sold 777 shares on December 13, 2012 rather than the 828 shares that were reported on an amended Form 4 filed on January 17, 2013.

Remarks:

Rhoda M. Minichillo, Attorney-in-Fact 07/31/2014

** 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.