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). Ш

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 [*] BOND ROBERT W | | | 2. Issuer Name and Ticker or Trading Symbol <u>PARKER HANNIFIN CORP</u> [PH] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
|---|---------------|---------------------|---|--|--|-----------------------|--|--|--|
| (Last) (First) (Middle) PARKER-HANNIFIN CORPORATION | | () | 3. Date of Earliest Transaction (Month/Day/Year) 11/25/2014 | х | Officer (give title below) VP/Pres-Fluid Conne | Other (specify below) | | | |
| 6035 PARKLAND (Street) CLEVELAND (City) | OH (State) | 44124-4141 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indivi X | dual or Joint/Group Filing (C Form filed by One Report Form filed by More than C | ing Person | | | |
| | | Table I Non Dari | vative Securities Acquired Disposed of or Beneficia | | nod | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 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 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|---|---|--|---------------|-----------|--|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | | | | | | | | 5,779.361 | I | Parker Retirement Savings Plan |
| Common Stock | | | | | | | | 356.432(1) | D | |
| Common Stock | 11/25/2014 | | М | | 16,240 | A | \$83.39 | 68,978 | D | |
| Common Stock | 11/25/2014 | | F | | 13,048 | D | \$133.24 | 55,930 | D | |
| Common Stock | 11/25/2014 | | S | | 2,292 | D | \$133.243 | 53,638 | D | |
| Common Stock | 11/25/2014 | | S | | 900 | D | \$133.272 | 52,738 | 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transac Code (In 8) | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | Form: Direct (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |
| Stock Appreciation Right | \$83.39 | 11/25/2014 | | М | | | 16,240 | 11/29/2013 | 08/15/2016 | Common Stock | 16,240 | \$0 | 0 | D | |

Explanation of Responses:

1. Dividend Reinvestment Plan.

Remarks:

Rhoda M. Minichillo, Attorney-in- 11/25/2014

Date

Fact ** Signature of Reporting Person

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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