PARKER HANNIFIN CORP

Form 4 May 01, 2014

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Issuer

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

Symbol

1(b).

Popoff Peter

Common

Common

Stock

Stock

04/30/2014

04/30/2014

(Print or Type Responses)

1. Name and Address of Reporting Person *

| | | PAR | KER HANNIFIN CORP [PH] | (Check all applicable) | | | | | | | |
|--------------------------------------|--|--|--|--|--|--|--|--|--|--|--|
| CORPOR | (First) HANNIFIN ATION, 6035 ND BOULEVAR | (Mont 04/30 | e of Earliest Transaction h/Day/Year))/2014 | Director 10% Owner Selection of the control of t | | | | | | | |
| | (Street) | | mendment, Date Original Month/Day/Year) | 6. Individual or Joint/Group Filing(Check | | | | | | | |
| | | Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting | | | | | | | | | |
| CLEVELA | AND, OH 44124-4 | 1141 | | Person | | | | | | | |
| (City) | (State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year) | | Code (Instr. 3, 4 and 5) | 5. Amount of Securities Ownership Indirect Beneficially Form: Beneficial Owned Direct (D) Ownership Following or Indirect Reported (I) Transaction(s) (Instr. 4) (Instr. 3 and 4) | | | | | | | |
| Common Stock | | | | 7,200.308 I Parker Retirement Savings Plan | | | | | | | |

5,104

1,734

D

\$0

126.165

8,557

6,823

D

D

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

A

F

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SEC 1474 (9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. | 6. Date Exerc | cisable and | 7. Titl | e and | 8. Price of |
|-------------|-------------|---------------------|--------------------|------------|-----------------------|----------------------------------|-------------|---------|----------|-------------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transacti | orNumber | Expiration D | ate | Amou | nt of | Derivative |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Under | lying | Security |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | (Instr. 8) Derivative | | | Securi | ties | (Instr. 5) |
| | Derivative | | | | Securities | ; | | (Instr. | 3 and 4) | |
| | Security | | | | Acquired | | | | | |
| | | | | | (A) or | | | | | |
| | | | | | Disposed | | | | | |
| | | | | | of (D) | | | | | |
| | | | | | (Instr. 3, | | | | | |
| | | | | | 4, and 5) | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | Amount | |
| | | | | | | Date Expirat Exercisable Date | Expiration | | or | |
| | | | | | | | • | | Number | |
| | | | | | | | | | of | |
| | | | | Code V | (A) (D) | | | | Shares | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Popoff Peter PARKER-HANNIFIN CORPORATION 6035 PARKLAND BOULEVARD CLEVELAND, OH 44124-4141

VP, President-Filtration Group

Signatures

Rhoda M. Minichillo, Attorney-in-Fact

05/01/2014

**Signature of Reporting Person Date

Explanation of Responses:

- * 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. Potential persons who are to 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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