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DONALDSC Form 4	ON CO INC										
September 1	1, 2014										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL OMB 3235-02		
Check this box Washington, D.C. 20549									Number:	January 31,	
if no longer subject to Section 16. Form 4 or				SECUR	Expires: 200 Estimated average burden hours per response 0.						
obligation may cont <i>See</i> Instru 1(b).	^{1s} Section 17	(a) of the	Public U		ling Com	pany	Act of	e Act of 1934, 1935 or Sectior 0	1		
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> Ward Jay L			2. Issuer Name and Ticker or Trading Symbol DONALDSON CO INC [DCI]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Checl	c all applicable)	
				(Month/Day/Year) 09/09/2014				Director 10% Owner X Officer (give title Other (specify below) below) Senior Vice President			
				endment, Date Original onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
BLOOMING	GTON, MN 554	-13						Person		porting	
(City)	(State)	(Zip)	Tabl	le I - Non-D	erivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	ecurity (Month/Day/Year) Execution Date, if			3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	09/09/2014			A	14.662		\$ 41.97	2,439	I	By Benefit Plan Trust	
Common Stock								14,704	I	By Benefit Plan Trust	
Common Stock								73,747	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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required to respond unless the form displays a currently valid OMB control number.

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

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transacti	5. onNumber	6. Date Exer Expiration D		7. Title ar Amount c		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/ e		Underlyir Securities (Instr. 3 a	5	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	or Title Nu of	nount 1mber ares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Ward Jay L 1400 WEST 94TH STREET BLOOMINGTON, MN 55413			Senior Vice President				
Signatures							
Amy C. Becker, Attorney-in-fa Ward	ct for Jay	L.	09/11/2014				
<u>**</u> Signature of Reporting Pers	son		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.