Murphy Robert B Form 4 December 12, 2017

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

OMB 3235-0287 Number:

Expires:

January 31, 2005

0.5

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if no longer subject to Section 16. Form 4 or Form 5

Check this box

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

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * Murphy Robert B | | | 2. Issuer Name and Ticker or Trading Symbol ROCKWELL AUTOMATION INC [ROK] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|---|--|-------------------------------|---|--|---|--|--|--|--|---|--|
| (Last) 1201 SOUTI | (First) (M | 3. Date of (Month/Da 12/08/20 | • | ansaction | | | Director 10% Owner Officer (give title Other (specify below) Sr. VP Operations & Eng. Svcs. | | | | |
| MILWAUK | 4. If Amendment, Date Original Filed(Month/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 Person | | | | | |
| (City) | (State) | (Zip) | Table | I - Non-D | erivative | Securi | ities Ac | quired, Disposed | of, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | Execution any | med on Date, if Day/Year) | 3. Transactic Code (Instr. 8) | 4. Secur onAcquire Dispose (Instr. 3 | d (A) of d of (E, 4 and (A) or |)) | 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 | | | | Code | rinoun | . (D) | Thee | 233.2824 (1) | I | By Saving Plan | |
| Common Stock | 12/08/2017 | | | A | 310 (3) | A | \$0 | 1,796 | D (4) | | |

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

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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. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|--------------------------------------|---|---|---|--|--------------------|---|---------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amoun or Number of Shares |
| Employee Stock Option (right to buy) | \$ 192.86 | 12/08/2017 | | A | 5,000 | 12/08/2018(2) | 12/08/2027 | Common Stock | 5,000 |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Murphy Robert B 1201 SOUTH SECOND STREET MILWAUKEE, WI 53204

Sr. VP Operations & Eng. Svcs.

Signatures

Karen A. Balistreri, Attorney-in fact for Robert B Murphy

12/12/2017

**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).
- (1) Shares represented by Company stock fund units acquired under the Company Savings Plan based on information furnished by the Plan Administrator as of 11/30/2017.
- (2) The option vests in three substantially equal annual installments beginning on the date exercisable.
- (3) Restricted stock award under the Company's 2012 Long-Term Incentives Plan.
- (4) Includes 1,100 shares held by the Company to implement restrictions on transfer unless and until certain conditions are met.

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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