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PALL CORI	P											
Form 4												
August 17, 2	2015											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
	UNITEL	SIAIES					INGE C	OMMISSION	OMB	3235-0287		
Check th	is box		vva	shington,	, D.C. 20	549			Number: Expires:	January 31,		
if no long	ger STATE	MENT O	ГСИЛА	ICES IN	BENIFE	ENEFICIAL OWNEDSHID OF				2005		
subject to	5		r Char		GES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated average burden hours per response 0.5		
Section 1 Form 4 o				SECO								
Form 5		ursuant to S	Section 1	6(a) of th	e Securi	ties F	Exchange	Act of 1934,	response	0.5		
obligatio	ns Section 17						•	1935 or Section	1			
may cont See Instr	linue.			vestment	•	· ·	•					
1(b).	detion	. ,			1	•						
(Print or Type I	Responses)											
		D *						5 D I I				
				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
Jones R. Brent Symbol												
			PALL	CORP [PI	LLJ			(Check	all applicable)		
(Last)	(First)	(Middle)		f Earliest T	ransaction							
		NL 05		Day/Year)				Director 10% Owner X Officer (give title Other (specify				
C/O PALL CORPORATION,, 25 08/13/2 HARBOR PARK DRIVE				015				below) below)				
HAKDUK I	AKK DRIVE							SVP, Corp.	Devel. & Trea	surer		
(Street) 4. If At			4. If Ame	nendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mon				nth/Day/Year)				Applicable Line)				
DODENIL								_X_ Form filed by O Form filed by M				
PORT WAS	SHINGTON, NY	Y 11050						Person		porting		
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned		
1.Title of	2. Transaction Da	te 2A. Deen	ned	3.	4. Securi			5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year		n Date, if	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities Beneficially Owned	OwnershipIndirectForm: DirectBenefici(D) orOwnership			
(Instr. 3)		any (Month/F)av/Year)							Ownership		
		(Infoliation	, uj, 10ui)	(111541: 0)				Following	Indirect (I)	(Instr. 4)		
						(A)		Reported	(Instr. 4)			
						or		Transaction(s) (Instr. 3 and 4)				
				Code V		(D)	Price	(Instr. 5 and 4)				
Common	08/13/2015			А	6,707	А	\$	6,707	D			
Stock					(1)		126.67	,				
Common	08/13/2015			F	2,480	D	\$	4,227	D			
Stock	00/15/2015			1	2,400	D	126.67	7,227	D			

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

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 control number.

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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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Tit Amou Unde Secur (Instr	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
r g	Director	10% Owner	Officer	Other			
Jones R. Brent C/O PALL CORPORATION, 25 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050			SVP, Corp. Devel. & Treasurer				
Signatures							

/s/ Adam Mandelbaum as Attorney-in-Fact for R. Brent Jones

**Signature of Reporting Person

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).

Represents Restricted Stock Units (RSUs) granted to the Reporting Person on September 28, 2012 pursuant to the Issuer's 2012 Stock Compensation Plan and (ii) earned and vested subject to the determination by the Compensation Committee on August 13, 2015 of the (1) Issuer's achievement of certain performance conditions for the fiscal year ended July 31, 2015 and (iii) the Reporting Person's satisfaction

of certain service conditions.

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.

Date

08/17/2015