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SCALF THO Form 4	OMAS R										
October 04, 2	2018										
FORM	Л	STATE	SECUL	оттес а	ND FY(ינער	NCEC	OMMISSION		PPROVAL	
	UNITED	SIAILS		shington,			NGE U	OWINI55ION	OMB Number:	3235-0287	
Check thi if no long	or					CT A			Expires:	January 31, 2005	
subject to Section 10 Form 4 or	F CHAN	GES IN J SECUR		CIA	LOWI	NERSHIP OF	Estimated a burden hou response	iverage			
Form 5 obligatior may conti <i>See</i> Instru 1(b).	inue. Section 17	(a) of the	Public U		ling Com	pany	Act of	e Act of 1934, 1935 or Sectior 0	1		
(Print or Type R	Responses)										
			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				(Check all applicable)				
(1				(Month/Day/Year) 10/02/2018				Director 10% Owner X Officer (give title Other (specify below) Senior Vice President			
Filed(Mo				nendment, Date Original Ionth/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	31-2303						Person		porting	
(City)	(State)	(Zip)	Tab	le I - Non-D	erivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Executio any	ned n Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	(Instr. 3, 4	posed	of (D)	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	10/02/2018			A	11.659	A	\$ 58.06	1,978	I	By Benefit Plan Trust	
Common Stock								6,490	I	By Benefit Plan Trust	
Common Stock								11,453	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)

1

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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 Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	3	ate	7. Title Amour Underl Securit (Instr. 3	nt of ying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SCALF THOMAS R 1400 WEST 94TH STREET BLOOMINGTON, MN 55431-2303			Senior Vice President					
Signatures								
Amy C. Becker, Attorney-in-fact for Thomas R.								
Scalf			10/04/2018					
**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.