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| SCAMINAC Form 4 August 11, 2 | CE JOSEPH M | | | | | | | | | |
|---|---|--|----------------|--|---|---|--|--|--------------------------|--|
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | N OMB Number: Expires: Estimated burden hou response | urs per | |
| See Instru 1(b). (Print or Type F | | 50(11) | | | e Compu | | | | | |
| 1. Name and A SCAMINA | | 2. Issuer Name and Ticker or Trading Symbol PARKER HANNIFIN CORP [PH] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Last) OM GROUI SQUARE, 1 | (Middle) BLIC | 3. Date of Earliest Transaction (Month/Day/Year) 08/10/2005 | | | | (Check all applicable) X_Director10% Owner Officer (give titleOther (specify below) below) | | | | |
| CLEVELAN | | 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) | Tab | de I - Non- | Dorivativa | Securities A | Acquired, Disposed | of or Bonoficia | lly Owned | |
| | 2. Transaction Date (Month/Day/Year) | 2A. Deeme Execution I any (Month/Da | ed Date, if | 3. Transactic Code (Instr. 8) | 4. Securit onAcquired Disposed (Instr. 3, 4 | ies (A) or 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 | |
| Reminder: Rep | ort on a separate lin | e for each cla | ass of sec | urities bene | Perso inforn requir | ns who res nation con red to resp lys a curre | or indirectly. spond to the colle tained in this forn ond unless the fo ntly valid OMB co | n are not rm | SEC 1474 (9-02) | |

 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. Number | 6. Date Exercisable and | 7. Title and Amount of | 8. I |
|-------------|-------------|---------------------|--------------------|------------|-----------------|-------------------------|------------------------|------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transactio | onof Derivative | Expiration Date | Underlying Securities | Der |
| Security | or Exercise | | any | Code | Securities | (Month/Day/Year) | (Instr. 3 and 4) | Sec |

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| (Instr. 3) | Price of Derivative Security | (Month/Day/Year) | (Instr. 8) | Acquire (A) or Dispose (D) (Instr. 3 and 5) | d of | | | | | (In: |
|------------------|------------------------------------|------------------|------------|--|------|---------------------|--------------------|-----------------|--|------|
| | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Option to buy | \$ 65.65 | 08/10/2005 | А | 2,750 | | (1) | 08/09/2015 | Common Stock | 2,750 | \$ |

Reporting Owners

| Reporting Owner Name / Addre | SS | Relationships | | | | |
|--|------------|---------------|-----------|---------|-------|--|
| F G () () () () () () () () () (| | Director | 10% Owner | Officer | Other | |
| SCAMINACE JOSEPH M OM GROUP, INC. 127 PUBLIC SQUARE, 1500 KEY CLEVELAND, OH 44114 | TOWER | X | | | | |
| Signatures | | | | | | |
| Aarti P. Amin, Attorney-in-Fact | 08/11/2005 | | | | | |
| **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) The option vests in two equal installments on 8/10/2006 and 8/10/2007.

(2) Granted under the Corporation's 2004 Non-Employee Directors' Stock Incentive Plan in a transaction exempt under Rule 16b-3.

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.