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DONALDSON CO INC

Form 3

October 15, 2015

FORM 3

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

OMB

3235-0104

0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Number: January 31,

burden hours per

Estimated average

OMB APPROVAL

16(a) of the Securities Evolution Act of 1024

34, response...

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

(Print or Type Responses)

| 1. Name and Address of Reporting Person *\frac{*}{A} Kramer Sheila G. | | | 2. Date of Event Requiring Statement | 3. Issuer Name and Ticker or Trading Symbol DONALDSON CO INC [DCI] | | | | |
|---|------------------------|-------------------|---|---|--|------------------------------------|---|--|
| (Last) | (First) | (Middle) | (Month/Day/Year) 10/12/2015 | 4. Relationship of Reporting Person(s) to Issuer | | porting | 5. If Amendment, Date Original Filed(Month/Day/Year) | |
| 1400 WEST 947 | ΓH STREE | T | | | | | Thea(man Bay, Teal) | |
| | (Street) | | | (C | Check all applic | licable) 6. Individual or Joint/Gr | | |
| BLOOMINGTO | DN, MNÂ | 55431-2303 | | X_ | Owner Officer tle below)(specif | Other y below) | Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | |
| (City) | (State) | (Zip) | Table I - No | n-Der | ivative Secu | rities B | Seneficially Owned | |
| 1.Title of Security (Instr. 4) | | | 2. Amount of Secur Beneficially Owned (Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Natur Owners (Instr. 5 | • | |
| Common Stock | | | 0 | | D | Â | | |
| Reminder: Report or owned directly or in | - | ne for each class | of securities beneficially | 5 | SEC 1473 (7-02 | 2) | | |
| | information required t | on contained in | o the collection of n this form are not ess the form displays a atrol number | | | | | |

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

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underlying Derivative Security | | 4. Conversion or Exercise | 5. Ownership Form of | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|--|--------------------|--|----------------------------------|------------------------------------|--|---|
| | Date Exercisable | Expiration Date | (Instr. 4) Title | Amount or Number of Shares | Price of Derivative Security | Derivative Security: Direct (D) or Indirect | |

(I) (Instr. 5)

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|----------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Kramer Sheila G. 1400 WEST 94TH STREET BLOOMINGTON, MN 55431-2303 | Â | Â | Vice President | Â | | | |

Signatures

Amy C. Becker, Attorney-in-Fact for Sheila G. 10/15/2015 Kramer

**Signature of Reporting Person

Date

Explanation of Responses:

- If the form is filed by more than one reporting person, see Instruction 5(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.

2 Reporting Owners