## Edgar Filing: PALL CORP - Form 4

PALL COR	Р											
Form 4												
August 17, 2	2015											
FORM	Λ4	~ ~							OMB APPROVAL			
	UNITED	STATES					NGE CO	OMMISSION	OMB	3235-0287		
Check th	uis box		Wa	shington	, D.C. 20	549			Number:			
if no lon	Ger			ICEC DI	DENIDE				Expires:	January 31, 2005		
subject t	.0	MENI OF	CHAP			ICIA	LOWN	ERSHIP OF	Estimated average burden hours per			
Section Form 4				SECU	ATTES							
Form 5		report to Se	action 1	6(a) of the	o Socurit	ios F	vehange	Act of 1934,	response	0.5		
obligatio	ons Section 17						-	1935 or Section				
may con	lunue.			ivestment	•	· ·						
<i>See</i> Instr 1(b).	ruction	50(11) 0	1 110 11	i vestinen.	. compun	.y 110		, ,				
1(0)												
(Print or Type	Responses)											
	Address of Reporting	g Person <sup>*</sup>	2. Issue	I I I I I I I I I I I I I I I I I I I				5. Relationship of Reporting Person(s) to Issuer				
Egholm Mi	chael		Symbol									
			PALL	CORP [P]	LL]			(Check	all applicable	)		
(Last)	(First)	(Middle)	3. Date c	of Earliest T	ransaction			(		/		
			(Month/I	Day/Year)				Director		Owner		
	CORPORATIO	N,, 25	08/13/2	2015				X Officer (give below)	title Othe below)	er (specify		
HARBOR	PARK DRIVE							· · · · · · · · · · · · · · · · · · ·	BioPharmaceu	ticals		
	(Street)		4. If Am	endment, D	ate Origina	1		6. Individual or Joi	nt/Group Filin	g(Check		
				-				Applicable Line)				
			,	,	·			_X_ Form filed by O				
PORT WA	SHINGTON, NY	7 11050					-	Form filed by Mo Person	ore than One Re	porting		
(City)	(State)	(Zip)										
(City)	(blue)	(Zip)	Tab	le I - Non-l	Derivative	Secur	ities Acqu	ired, Disposed of,	or Beneficial	ly Owned		
1.Title of	2. Transaction Dat		1						6.	7. Nature of		
Security	(Month/Day/Year)		Date, if	Transaction Disposed of (D)				Securities	Ownership	Indirect Beneficial		
(Instr. 3)		any (Month/Da	Code(Instr. 3, 4 and 5)Day/Year)(Instr. 8)					Beneficially Owned		Ownership		
		(monus Du	<i>y</i> , i cui)	(111541: 0)				Following	or Indirect	(Instr. 4)		
						(A)		Reported	(I)			
						or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
				Code V	Amount	(D)	Price	(Insu: 5 and 4)				
Common	08/13/2015			А	17,072	А	\$	18,005.997	D			
Stock					(1)		126.67	-0,000,007	-			
Common	00/12/2015			Б	0.007	D	\$	0.000.007	D			
Stock	08/13/2015			F	8,805	D	126.67	9,200.997	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,			7. Title : Amount Underly Securitic (Instr. 3	t of ving es	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 N o	Number		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Egholm Michael C/O PALL CORPORATION, 25 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050			President, BioPharmaceuticals				
Signatures							
/s/ Adam Mandelbaum as Attorney- Egholm	in-Fact fo	r Michael	08/17/2015				

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

\*\*Signature of Reporting Person

\*\* 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
 (1) Compensation Plan and (ii) earned and vested subject to the determination by the Compensation Committee on August 13, 2015 of the Issuer's achievement of certain performance conditions for the fiscal year ended July 31, 2015 and (iii) the Reporting Person's satisfaction

Date

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.