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PALL COR Form 4	Р										
December 1	3, 2013										
FORM	14 UNITED	STATES	SECU	DITIES /	AND FY	CHANCE		т	PPROVAL		
Washington, D.C. 20549								Number:	3235-0287		
Check this box if no longer								Expires:	January 31 2005		
In the lengthSTATEMENT OF CHANGES IN Bsubject toSection 16.Section 16.SECURIForm 4 orFiled pursuant to Section 16(a) of the							Estimated	ated average n hours per			
obligatio may cor <i>See</i> Inst 1(b).	ons Section 17((a) of the l	Public U	Jtility Hol	ding Co		of 1935 or Section	on			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Kim H. Alex			2. Issuer Name and Ticker or Trading Symbol PALL CORP [PLL]			Trading	5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle)			3. Date of Earliest Transaction				(Check all applicable)				
C/O PALL HARBOR	(Month/Day/Year) 12/11/2013			Director 10% Owner X Officer (give title Other (specify below) SVP Bus Dev & Strat Plan							
(Street)			4. If Amendment, Date Original			al	6. Individual or Joint/Group Filing(Check				
PORT WA	SHINGTON, NY	11050	Filed(Mo	onth/Day/Yea	ır)		Applicable Line) _X_ Form filed by Form filed by Person				
(City)	(State)	(Zip)	Tat	ole I - Non-J	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	(A) or of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(D) Price	(Instr. 3 and 4)				
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	-	-	-				
					inforr requi	nation con red to resp ays a curre	spond to the colle tained in this form ond unless the for ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab					sposed of, or convertible	Beneficially Owned securities)	I			

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				
				Code V	(A) (D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Options (Rights to Buy)	\$ 82.47	12/11/2013		А	7,975	<u>(1)</u>	12/11/2020	Common Stock	7,975
Restricted Stock Units	(2)	12/11/2013		А	1,603	12/11/2016	12/11/2016	Common Stock	1,603

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Kim H. Alex C/O PALL CORPORATION 25 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050			SVP Bus Dev & Strat Plan				
Signatures							
/s/ Cathleen Colvin as Attorney-in-Fac Alex Kim	12/13/2013						
** 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).

The Stock Options will vest 33.33% on each of the first three anniversaries of the date shown in Column 3 provided the reporting person is still employed by the Issuer or a subsidiary on that date (unless the termination of employment is by reason of: (i) death, in which case (1) all unvested options will vest, or (ii) disability or retirement in which case unvested options will continue to vest according to the vesting schedule).

The Units will vest and become convertible into shares of Common Stock of the Issuer on a one-for-one basis on the date shown in Column 6 provided the Reporting Person is still employed by the Issuer or a subsidiary on that date. If employment terminates sooner, the

(2) Units will be forfeited unless termination of employment occurs because of death, disability or retirement, in any of which events the Units will vest in whole or in part.

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.