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Form 4	Р										
October 04,	2005										
FORM	UNITED	STATES SECU	RITIES A			NGE	COMMISSIO		OMB A OMB Number:	PPROVA 3235	AL -0287
Check th if no lon, subject to Section 1 Form 4 of Form 5 obligation may con See Instr 1(b).	ger o 16. or Filed pur ons tinue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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							Expires: Estimated average burden hours per response		ary 31, 2005 0.5
(Print or Type	Responses)										
1. Name and A MCDERM	Address of Reporting OTT LISA	Symbol	er Name an CORP [P		Tradii	ng	5. Relationship o Issuer		eporting Per		
(Last) PALL COR NORTHER	PORATION, 220	(Month	3. Date of Earliest Transaction Month/Day/Year))9/30/2005				Director 10% Owner XOfficer (give title Other (specify below) below) Corporate V.P Finance				
	(Street)		nendment, D onth/Day/Yea	-	1		6. Individual or Applicable Line) _X_ Form filed by	y One	Reporting Po	erson	
EAST HILI	LS, NY 11548-12	.89					Form filed by Person	y Mor	e than One R	eporting	
(City)	(State)	(Zip) Ta	ble I - Non-l	Derivative	Secur	ities A	cquired, Disposed	of, o	r Beneficia	lly Owne	d
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	4. Securiti nAcquired Disposed (Instr. 3, 4 Amount	(A) or of (D) and 5 (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form (D) (I)	Wenership n: Direct or Indirect tr. 4)	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al iip
Reminder: Rep	port on a separate line	e for each class of see	curities bene	ficially own	ned dir	rectly o	or indirectly.				

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and Expiration	7. Title and Amo
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionDerivative		Date	Underlying Secu
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	An Nu Sh
Bonus Units	\$ 0 <u>(1)</u>	09/30/2005		А		5,188.04 (2)		09/30/2009 <u>(3)</u>	09/30/2009 <u>(3)</u>	Common Stock	5,

Reporting Owners

Reporting Owner Name / Address			Relationships	
	Director	10% Owner	Officer	Other
MCDERMOTT LISA PALL CORPORATION 2200 NORTHERN BLVD EAST HILLS, NY 11548-1289			Corporate V.P Finance	
Signatures				
Mary Ann Bartlett as Attorney-i	n-Fact fo	r Lisa	10/04/2005	

McDermott

**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 for 1, subject to adjustments if the reporting person's employment with the Issuer terminates under certain circumstances prior to the (1)fourth anniversary of the date on which the units were granted.
- (2) Includes 2594.02 matching units granted by the Issuer, for which the price in Column 8 was not paid.

The Date Exercisable (vesting date) and the Expiration Date are the fourth anniversary date of the transaction date shown in column 3 of (3) this table, or, if sooner, the date on which the reporting person's employment with the Issuer terminates, or, if later, the date to which the reporting person elects to defer receipt of common stock beyond the vesting date.

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.