Edgar Filing: GORMAN RUPP CO - Form 4

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| Form 4 | | | | | | | | | | | |
|---|---|-------------------|--|---|------------|---------------------|--|--|--------------------------|----------------------------------|--|
| September 3 | | | | | | | | | OMB AF | PROVAL | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549 | | | | | | | OMMISSION | OMB Number: | 3235-0287 | | |
| Check th if no long subject to Section 1 Form 4 of Form 5 obligatio may cont See Instr 1(b). | F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940 | | | | | | January 3 200 Estimated average burden hours per response 0. | | | | |
| (Print or Type] | Responses) | | | | | | | | | | |
| WALSTON W WAYNE Sym | | | Symbol | 2. Issuer Name and Ticker or Trading Symbol GORMAN RUPP CO [GRC] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Mo | | | (Month/E | b. Date of Earliest Transaction Month/Day/Year) 09/26/2013 | | | | (Check all applicable) <u>X</u> Director Officer (give title below) Director below) | | | |
| | | | | endment, Date Original onth/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) | Tabl | le I - Non-E | Derivative | Secui | ities Acqu | uired, Disposed of, | or Beneficial | v Owned | |
| 1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, any (Month/Day/Year) | | ned 1 Date, if | Code (Instr. 3, 4 and 5) ar) (Instr. 8) | | | cquired d of (D) | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect | | |
| | | | | Code V | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | |
| Common Stock | 09/26/2013 | | | Р | 200 | А | \$ 40.789 | 18,278 <u>(1)</u> | D | | |
| Common Stock | | | | | | | | 1,234 | I | By Betty Walston Trust (2) | |

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) | 4. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Tit Amou Unde Secur (Instr | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---------------------------------------|---|---------------------|--------------------|---|--|---|---|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| WALSTON W WAYNE | | | | | | | | |
| 33 EMS T40A LANE | Х | | | | | | | |
| LEESBURG, IN 46538 | | | | | | | | |
| Signatures | | | | | | | | |
| W. Wayne Walston BY: /s/David P. Emmens Attorney-in-Fact | | | | | | | | |

**Signature of Reporting Person

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) Includes 14,932 shares acquired through an exempt non-employee Directors' Compensation Plan.
- (2) Common Shares owned by Mrs. Walston's Trust, of which Mr. and Mrs. Walston are co-trustees. Mr. Walston disclaims beneficial ownership of all the shares referred to in this footnote.

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.

09/30/2013

Date