Edgar Filing: APPLIED INDUSTRIAL TECHNOLOGIES INC - Form 4

APPLIED INDUSTRIAL TECHNOLOGIES INC

Form 4

January 17, 2017

FORM 4

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

OMB Number: 3235-0287

burden hours per

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

OMB APPROVAL

Section 16.
Form 4 or
Form 5
obligations
may continue.
See Instruction

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

response... 0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * THORNTON JERRY SUE			Symbol		and Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer			
		APPLIED INDUSTRIAL TECHNOLOGIES INC [AIT]			(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)			X Director Officer (Other (specify	
ONE APP	LIED PLAZA		01/16/	2017				,	
	(Street)		4. If An	nendment	, Date Original	6. Individual	or Joint/Grou	p Filing(Check	
			Filed(M	onth/Day/	Year)	Applicable Lin _X_ Form filed		ting Person	
CLEVELA	AND, OH 44115					Form filed Person	by More than	One Reporting	
(City)	(State)	(Zip)	Ta	ble I - No	on-Derivative Securities A	equired, Dispose	ed of, or Ben	eficially Owned	
1.Title of	2. Transaction Date	e 2A. Deeme	ed	3.	4. Securities Acquired	5. Amount of	6.	7. Nature of	
Committee	(Month/Doy/Voor)	Evacution 1	Doto if	Troncoc	tion(A) or Disposed of (D)	Convertion	Oumarchin	Indiract Danafic	

							- 1 · · · · · · · · · · · · · · · · · ·	,	· · · · · · · · · · · · · · · · · · ·	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)		
Common Stock	01/16/2017		J <u>(1)</u>	4,631	D	\$ 61.41	2,462.47 (2)	I	Deferred Compensation Plan	
Common Stock	01/16/2017		J <u>(1)</u>	4,631	A	\$ 61.41	58,429.953	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474

(9-02)

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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	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						Excicisable	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
.t	Director	10% Owner	Officer	Other			
THORNTON JERRY SUE							
ONE APPLIED PLAZA	X						
CLEVELAND, OH 44115							

Signatures

Dianne Misenko/POA for Jerry Sue 01/16/2017 Thornton

> **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).
- Represents distribution from Deferred Compensation Plan for Non-Employee Directors to reporting person.
- Adjusted to reflect cash payment in lieu of distribution of 0.13 fractional share from the Deferred Compensation Plan for Non-Employee

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.

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