## Edgar Filing: TIMKEN CO - Form 4

TIMKEN CO	)											
Form 4												
May 25, 201	6											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL				
	UNITE	) STATES		AITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287		
Check thi if no long									Expires:	January 31,		
subject to		MENT O	F CHAN			ICIA	LOW	NERSHIP OF	Estimated a	2005 Verage		
Section 1	6.			SECUR	ITIES				burden hou	•		
Form 4 or									response	0.5		
Form 5 obligation	• • • • •						-	e Act of 1934,				
may cont				•	•	· ·		1935 or Section	1			
See Instru	iction	30(h)	of the In	vestment	Compan	y Ac	t of 194	ю				
1(b).												
(Print or Type R	Responses)											
(												
1. Name and A	ddress of Reportin	g Person *	2. Issuer	Name and	Ticker or	Tradii	ng	5. Relationship of	Reporting Pers	on(s) to		
	CQUELINE F	-	Symbol		1101101 01	11441		Issuer				
			-	N CO [TH	KR]							
(Last)	(First)	(Middle)		Earliest Tra	-			(Chec)	k all applicable	)		
(Lust)	(1130)	(initiality)	(Month/D		ansaction			_X_ Director	10%	Owner		
4500 MT. P	LEASANT ST.	NW	05/24/2	-				Officer (give	title Othe	er (specify		
			00/2 //2	010				below)	below)			
	(Street)		4. If Ame	ndment, Da	te Origina	1		6. Individual or Jo	int/Group Filin	nt/Group Filing(Check		
			Filed(Mor	th/Day/Year)	)			Applicable Line)				
NODTLLCA	NTON OU 44	720						_X_ Form filed by C Form filed by M				
NORTHCA	NTON, OH 44	120						Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Da	ate 2A. Deer	med	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year		n Date, if	Transactio				Securities	Form: Direct			
(Instr. 3)		any (Month/I	Day/Year)	Code (Instr. 8)	(Instr. 3,	4 and	5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(INIOIIUI)I	Jay/ I Cal)	(Insu. 0)				Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported	. ,	× ,		
						or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	05/24/2016			S	1,250	D	\$	20,517	D			
Stock				~	1,200	_	33.27	_ 0,0 1 /				

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	of	vative rities uired or osed		ate	Unde Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, an	d 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address				
Reporting O (mer runne / runness	Director	10% Owner	Officer	Other
WOODS JACQUELINE F 4500 MT. PLEASANT ST. NW NORTH CANTON, OH 44720	Х			
Signatures				
/s/ Jacqueline F. Woods 05/2	5/2016			
**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).

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.