Edgar Filing: PENTAIR plc - Form 4

PENTAIR pl	lc										
Form 4											
February 24,	2015										
FORM	14								OMB AF	PROVAL	
	UNITED	STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check the				0 /					Expires:	January 31	
if no long subject to		IENT O	F CHAN	GES IN	BENEF	ICIA	LOW	NERSHIP OF	•	2005	
Subject to Section 16. Form 4 or				SECURITIES					Estimated average burden hours per response 0.5		
Form 5		suant to S	Section 1	6(a) of the	e Securit	ies E	xchang	e Act of 1934,	response	0.0	
obligation	ns Section 17(•	1935 or Section	1		
may cont See Instru	inue.			vestment	•	· ·					
1(b).											
(Print or Type I	Responses)										
1. Name and Address of Reporting Person [*] _2. Issuer Name and Ticker or Trading 5. Relationship of							Reporting Pers	son(s) to			
Frykman Karl R. Symbol				r Name and Ticker or Trading				Issuer			
Ĵ			-	AIR plc [PNR]							
(Last)	(First) (Middle)	3. Date of Earliest Transaction (Check				k all applicable)				
(Last)	(1131) (.	(vildule)	(Month/D					Director10% Owner			
5500 WAY2	ZATA BLVD., S	UITE	02/20/2	-				X Officer (give title Other (specify			
800				/				below) below) President Aquatic Systems			
	(Street)		4 If Ama	ndmant Da	ta Ominima	1					
				If Amendment, Date Original ed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
			1 neu(moi	illi/Day/Tear)			_X_Form filed by C	One Reporting Pe	rson	
GOLDEN V	ALLEY, MN 55	5416						Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	e 2A. Deei	ned	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)		n Date, if	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Form: Direct Indirec		
(Instr. 3)		any (Month/Da			(Instr. 3,	4 and	5)	J .		Beneficial Ownership	
		(WORDER)	Juy/ I cui)	(Instr. 8)				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
C				Code V	Amount	(D)	Price	(insure and i)			
Common	02/20/2015			Μ	7,316	А	\$ 41.12	28,746	D		
Shares							41.12				
Common Shares	02/20/2015			F	4,951	D	\$ 68.03	23,795	D		

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Employee Stock Option (right to buy)	\$ 41.12	02/20/2015		М	7,316	03/01/2006 <u>(1)</u>	03/01/2015	Common Shares	7,316

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Frykman Karl R. 5500 WAYZATA BLVD., SUITE 800 GOLDEN VALLEY, MN 55416			President Aquatic Systems			
Signatures						
/s/ John K. Wilson, Attorney-in-Fact for Ka Frykman	arl R.	02/24/2	2015			
**Signature of Reporting Person		Date				
Explanation of Response	es:					

planation of nesponses.

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) One-third of the stock options became exercisable on the first, second, and third anniversary of the grant.

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.