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DOVER COL	RP										
Form 4 May 11, 2009)										
FORM	1								PPROVAL		
	UNITED	STATES		RITIES A			E COMMISSION	N OMB Number:	3235-0287		
Check this if no long subject to Section 16 Form 4 or Form 5		NGES IN SECUI	Estimated burden hou response	irs per							
Form 5 obligations may continue. See Instruction 1(b). 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											
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> Kloosterboer Jay L			2. Issuer Name and Ticker or Trading Symbol DOVER CORP [DOV]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (I					(Check all applicable)					
C/O DOVER CORPORATION, 280 PARK AVENUE			(Month/Day/Year) 05/07/2009				Director 10% Owner X Officer (give title Other (specify below) below) Vice President				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
NEW YORK	K, NY 10017						Form filed by Person	More than One R	eporting		
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	Code (Instr. 8)	4. Securit mAcquired Disposed (Instr. 3, 4 Amount	(A) or of (D)	Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Repo	ort on a separate line	for each cl	ass of sec	urities bene	ficially ow	ned directly	or indirectly				
reminder. Rept	at on a separate find				Perso inforn requir	ns who rest nation cont red to resp nys a curre	spond to the colle tained in this form ond unless the fo ontly valid OMB co	n are not rm	SEC 1474 (9-02)		

 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	6. Date Exercisable and	7. Title and Amount of	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onof Derivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (A) or Disposed (D) (Instr. 3, and 5)	l of				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Performance Shares	<u>(1)</u>	05/07/2009		А		3,411		(1)	(1)	Common Stock	3,411 (2)

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Kloosterboer Jay L C/O DOVER CORPORATION 280 PARK AVENUE NEW YORK, NY 10017			Vice President					
Signatures								
Jay Kloosterboer by Joseph W. S Attorney-in-Fact		05/11/2009						
<u>**</u> Signature of Reporting	Person		Date					

**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).

Represents award of performance shares under the Dover Corporation ("Dover") 2005 Equity and Cash Incentive Plan (the "Plan") on 2/12/2009, subject to shareholder approval of proposed amendments to the Plan which approval was obtained on 5/7/2009. Each

- (1) performance share represents a contingent right to receive shares of Dover common stock, based on Dover's relative shareholder return versus that of Dover's peer group over the three-year performance period ending 12/31/2011.
- Represents target grant amount. The actual number of shares that will be paid in respect of the performance share award may range from (2) 0% to 200% of the target 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.

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