FORM 4

obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT
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OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>STUBBS MICHAEL B</u>				2. Issuer Name and Ticker or Trading Symbol DOVER Corp [DOV]								(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O DOVER CORPORATION 3005 HIGHLAND PARKWAY				3. Date of Earliest Transaction (Month/Day/Year) 01/05/2016									Offic belo	er (give title w)	Other below	(specify		
(Street) DOWNE GROVE	RS IL		60515		4. If An	If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	•	(Zip)										<u> </u>					
1. Title of Security (Instr. 3)			2. Transa Date	2. Transaction		2A. Deemed Execution Date,		DIS				(A) or	5. Am Secur Benef Owne	ount of	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount		(A) or (D)	Price	Repor Transa (Instr.	ted action(s) 3 and 4)		(Instr. 4)		
Common	Stock			01/05/	/2016			G	V	129,00	00	D	\$0	12	5,727(1)	D		
Common	Stock			01/05/	/2016			G	v	129,00	00	A	\$0	1	29,000	I	By trust ⁽¹⁾	
Common	Stock													3	49,488	I	By trust ⁽²⁾⁽³⁾	
Common	Stock														1,000	I	By spouse ⁽⁴⁾	
Common	Stock													5	92,390	I	By trust ⁽⁵⁾⁽³⁾	
Common Stock													20,972		I	By trust ⁽⁶⁾⁽³⁾		
		Т	able II - I							sed of, onvertib				Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 2. Conversion Date (Month/Day/Year) 3. Transaction Date Execution E if any (Month/Day)			Date,	Code (Inst		on of I		6. Date Exercisa Expiration Date (Month/Day/Yea		7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		De Se (In	Price of erivative ecurity istr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V	(A	.) (D)	Date Exercisa	Expiration Date	Titl	or Nur of	ount nber res						

Explanation of Responses:

- 1. Represents transfer to the Michael B. Stubbs 2010 Grantor Retained Annuity Trust No. 1 over which the Reporting Person has power of substitution of assets.
- 2. Shares held by the 1993 Stubbs Family Trust of which the Reporting Person, his spouse and his descendants are beneficiaries.
- 3. The Reporting Person disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest therein and this report shall not be deemed an admission that the Reporting Person is the beneficial owner of such securities (except to the extent of his pecuniary interest therein) for purposes of Section 16 or for any other purpose
- 4. The Reporting Person disclaims beneficial ownership of the reported securities and this report shall not be deemed an admission that the Reporting Person is the beneficial owner of such securities for purposes of Section 16 or any other purpose.
- 5. Shares held by the Gretchen B. Stubbs Residuary Trust of which the Reporting Person, his spouse and his descendants are beneficiaries.
- 6. Shares held by the Trust f/b/o Jill S. Bradburn of which a member of the Reporting Person's immediate family is the beneficiary, the Reporting Person is co-trustee and a contingent beneficiary.

Remarks:

/s/ Michael B. Stubbs

01/13/2016

Date

** Signature of Reporting Person

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

- * 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.

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 Number.