FORM 4

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
obligations may continue. See
netruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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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>GRAHAM KRISTIANE C</u>					2. Issuer Name and Ticker or Trading Symbol DOVER Corp [DOV]										p of Reporting Person(s) to Issu olicable) ctor 10% Own			
(Last) (First) (Middle) C/O DOVER CORPORATION 3005 HIGHLAND PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 08/06/2018									Offic below	er (give title w)	Othe belo	r (specify v)	
(Street) DOWNE GROVE	RS _{IL}	6	60515		- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(St	ate) (.	Zip)															
		Tabl	e I - No	n-Deriv	/ative	Sec	curitie	s Ac	quired	, Dis	sposed o	f, or E	Benefic	ially	Owne	ed		
Date			2. Transa Date (Month/D		Execution Date,		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			and 5) Secu Bene		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	Price	e	Trans	action(s) 3 and 4)		(Instr. 4)
Common Stock 08/06/2				/2018	018			S		50,000	D	\$82	75 ⁽¹⁾	3	67,324	D		
Common Stock															2,460	I	By children	
Common Stock														1		1,116	I	By trust ⁽²⁾⁽³⁾
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Security Price of Derivative Security Or Exercise Price of Derivative Security Date (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year)			4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) o Dispo of (D) (Instrand 5	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)			

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$82.54 to \$82.81 inclusive. The reporting person undertakes to provide to Dover Corporation, any security holder of Dover Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in footnote (1) to this Form 4.
- 2. The Reporting Person disclaims beneficial ownership of the reported securities except to the extent of her pecuniary interest therein, if any, 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 her pecuniary interest therein) for the purposes of Section 16 or for any other purpose
- 3. Represents shares held by trust of which the Reporting Person is one of the trustees and as to which immediate family members are among the beneficiaries.

Remarks:

/s/ Kristiane C. Graham by Alison M. Rhoten, Attorney-in- 08/08/2018 fact

** Signature of Reporting Person Date

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.