#### Edgar Filing: LAKE CHRISTOPHER H - Form 5

#### LAKE CHRISTOPHER H

Form 5

February 09, 2018

(City)

FORM 5

#### **OMB APPROVAL OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer LAKE CHRISTOPHER H Symbol GORMAN RUPP CO [GRC] (Check all applicable) 3 Statement for Issuer's Fiscal Vear Ended (Middle)

(Last)	(1 1131)	(Wildaic)	3. Statement for issuer 8 l'iscar i car Ended		
			(Month/Day/Year)	_X_ Director	10% Owner
			12/31/2017	Officer (give title	
118 SEWICKI	LEY FARM	S CIRCLE		below)	below)
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/	Group Reporting

Filed(Month/Day/Year)

(check applicable line)

### MARS, PAÂ 16046 \_X\_ Form Filed by One Reporting Person

Form Filed by More than One Reporting Person

(City)	(State) (A	Table	e I - Non-Deri	vative Sec	uritie	s Acqui	ired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi Acquired Disposed (Instr. 3,	l (A) of (D 4 and (A) or	)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	11/22/2017	Â	G	426	A	\$0	24,303 (1)	D	Â
Common Stock	11/14/2017	Â	G	878	A	\$0	35,930	I	By children

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

(State)

(Zin)

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.

**SEC 2270** (9-02)

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	int of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
									Amount	
						Date	Expiration	m: 1	or	
						Exercisable	Date	Title	Number	
					<i>(</i> 1) <i>(</i> 2)				of	
					(A) (D)				Shares	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
LAKE CHRISTOPHER H 118 SEWICKLEY FARMS CIRCLE MARS, PA 16046	ÂX	Â	Â	Â			

## **Signatures**

Christopher H. Lake BY: /s/Brigette A. Burnell Attorney-in-Fact

02/09/2018

of D

Is Fi

\*\*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).
- (1) Includes 17,397 shares acquired through an exempt non-employee Directors' Compensation Plan.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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