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Form 4 June 03, 2003 FORM	4 UNITED STATE	S SECURITIES A Washington			GE C	COMMISSION	OMB AI OMB Number:	PPROVAL 3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 1(b).							•		
(Print or Type F	lesponses)								
	ddress of Reporting Person <u>*</u> ONSTANCE J	2. Issuer Name an Symbol INGERSOLL R		-		5. Relationship of Issuer			
(Last)	(First) (Middle)	3. Date of Earliest T	ransaction			(Chec	k all applicable	;)	
	SOLL-RAND , 155 CHESTNUT AD	(Month/Day/Year) 06/02/2008				X_ Director Officer (give below)		Owner er (specify	
	(Street)	4. If Amendment, D Filed(Month/Day/Yea	-			6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person			
MONTVALE, NJ 07645 — Form filed by More than One Reporting Person							porting		
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	2. Transaction Date 2A. De (Month/Day/Year) 2A. De Execut any (Month		ion(A) or Di (D) (Instr. 3, 4	sposed 4 and 5 (A) or	of	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Class A Common Shares						1,791.22	D		
Class A Common Shares (DDCP) (1)	06/02/2008	А	92.7	A	<u>(1)</u>	22,444.59	D		
Class A Common Shares (DDCP II)	06/02/2008	А	570.27	A	(2)	6,125.22	D		

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(2)

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.

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)	4. Transacti Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
HORNER CONSTANCE J C/O INGERSOLL-RAND COMPANY 155 CHESTNUT RIDGE ROAD MONTVALE, NJ 07645	Х						
Signatures							
By:/s/Barbara A. Santoro - Attorney-in-Fact		06/03/2008					
**Signature of Reporting Person		Date					
Explanation of Poopon	0001						

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 units acquired under the IR Director Deferred Compensation Plan (the "DDCP"), which are subject to the vesting
 provisions of the DDCP. The units are to be converted on a one-for-one basis and settled in Class A common shares upon the reporting person's termination of employment with the issuer, or earlier or later upon certain elections.
- (2) Represents units acquired under the IR Director Deferred Compensation Plan II (the "DDCP II"), which are subject to the vesting provisions of the DDCP II. The units are to be converted on a one-for-one basis and settled in Class A common shares upon the

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reporting person's termination of employment with the issuer, or earlier or later upon certain elections.

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.