FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C	20549
vvasiiiiiqtoii,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
- 1	l 6									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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>Juneja Girish</u>						2. Issuer Name and Ticker or Trading Symbol DOVER Corp [DOV]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 02/08/2024									Officer below)	er (give title v) Senior VP &		Other (s below)	specify		
C/O DOVER CORPORATION 3005 HIGHLAND PARKWAY						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) DOWNERS IL 60515						X Form filed by One Reporting Person Form filed by More than One Reporting Person															
GROVE					Ru	Rule 10b5-1(c) Transaction Indication								•							
(City)	(Sta	te) (Z	(ip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisficate the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												to satisfy				
		Tabl	e I - No	n-Deriv	ative	Se	curities	s Acc	quired	, Dis	sposed o	f, or B	ene	ficially	/ Owned						
Da			Date			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4				l and 5) Securities Beneficia Owned Fo		Form (D) o	r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	r	Price	Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)			
Common Stock 0					/2024			A		937(1)	A	A \$0		8,7	8,769		D				
Common Stock 02/0					/2024						1,249(2)) A		\$0	10,	,018		D			
Common Stock 02/08/						2024		F		405(2)	D		\$160.1 3	9,0	9,613		D				
Common Stock															5:	522			401K Plan		
		Ta	able II -								osed of, convertib				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ate Executio		4. Transaction Code (Instr. 8)		on of		6. Date Exerci Expiration Dat (Month/Day/Ye		e Amount o		t of es ring ive S		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Securities Owned Following Reported Transactio (Instr. 4)	e O S Fi Ily D o (!)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	N C	Amount or Number of Shares	ber						
Stock Appreciation Right	\$160.11	02/08/2024			A		8,328		02/08/2	027	02/08/2034	Commo	n	8,328	\$0	8,328	3	D			

Explanation of Responses:

- 1. Represents grant of restricted stock units. Each restricted stock unit represents a contingent right to receive one share of Dover common stock. The restricted stock units will vest in three annual installments beginning on March 15, 2025 ...
- 2. Represents settlement of performance shares representing a contingent right to receive shares of Dover common stock, based on Dover's relative total shareholder return for the three-year period ended December 31, 2023.

/s/ Girish Juneja by John C. Nelson, Attorney in Fact

02/12/2024

** 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.