FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OVAL								
3235-0287								
Estimated average burden								
0.5								

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Restricted Stock Units	(4)		08/27/2018			Code		†	51 ⁽⁵⁾	(D)	Exerc	(6)	Date (6)		nmon	Shares 151	\$0	51,146	D	
						Cada				(D)	Date	.:h	Expiratio			Amount or Number of				
1. Title of Derivative Security (Instr. 3)		rsion rcise of tive	3. Transaction Date (Month/Day/Year)	Exec if any	Deemed cution Date,	4. Trans Code	nsaction de (Instr.		5. Numb		6. Da	te Exe	ercisable and	7. Ti Amo Sec Und Deri	tle and ount of urities erlying vative urity (In	d f s	8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			Та	ble l									isposed s, conve				Illy Owned			
Common	Stock ⁽³⁾)															41,401	I	First Francis Company Inc.	у,
Common	Stock ⁽³⁾)															22,500	I	L'Accent Provence	
Common	Stock ⁽³⁾)															11,700	I	Crawford Capital Company	
Common	Stock ⁽²⁾)															19,605	I	Individua Account Retireme Plan	
Common	Stock ⁽¹⁾)															10,650	I	Spouse	
Common	Stock				08/28/201	18				Co	de	v	Amount 48,186	(A) or (D)	Price	tr (lı	ransaction(s) nstr. 3 and 4) 1,522,148	D		-
1. Title of Security (Instr. 3)			2	2. Transaction Date (Month/Day/Y	n 2 Eear) if	2A. Deemed Execution Date,		3. Transaction Code (Instr.		ion	4. Securities Acquired Disposed Of (D) (Instr. 3 and 5)		red (A)	or 5.	Amount of ecurities eneficially wned ollowing eported	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	Indirect			
(City)		(Stat			n-Derivati	ive S	ecu	ıritie	s Ad	can	ired	. Dis	sposed o	f. or l	Bene	ficiall	v Owned			_
CLEVELAND OH 44124							Line) X Formfiled by One Reporting Person Formfiled by More than One Reporting													
(Street)				4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable												\dashv				
(Last) 6065 PAI	RKLAN	3. Date of Earliest Transaction (Month/Day/Year) 08/27/2018									X Officer (give title Other (specify below) President									
CRAWFO		PARK OHIO HOLDINGS CORP [PKOH]									\dashv	(Check all applicable) X Director X 10% Owner								
			Reporting Person*			l						•	Symbol	,				orting Person(s)	to Issuer	

Explanation of Responses:

- 1. The reporting person disclaims beneficial ownership of all securities held by his wife and this report shall not be deemed an admission that the reporting person is the beneficial owner of those shares for purposes of Section 16 for any other purpose.
- 2. Amount of securities beneficially owned as of June 4, 2018.
- 3. The reporting person is a shareholder of the corporation that owns the reported securities and disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest therein.
- 4. Each Restricted Stock Unit ("RSU") represents a right to receive one share of Park-Ohio Holdings Corp. common stock ("Share").
- 5. Reflects additional RSUs granted on August 27, 2018 pursuant to dividend equivalent sections of the Restricted Stock Units Agreements between Issuer and the Reporting Person.
- 6. RSUs are fully vested and will be settled in Shares and delivered to the Reporting Person within 30 days after separation of service.

Remarks:

** 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.