## Edgar Filing: SHERMAN JEFFREY S - Form 4

SHERMAN	JEFFREY S										
Form 4 November 2	1 2012										
									OMB A	PPROVAL	
FORM	<b>14</b> UNITED	STATES		ITIES Al hington,			NGE	COMMISSION	OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 o	<sup>ger</sup> <b>STATEN</b> 6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires:January 31, 2005Estimated averageburden hours per response0.5	
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a	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									
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> SHERMAN JEFFREY S			2. Issuer Name <b>and</b> Ticker or Trading Symbol BECTON DICKINSON & CO				g	5. Relationship of Reporting Person(s) to Issuer			
			[BDX]					(Check all applicable)			
	(First) (N ON, DICKINSON 7, 1 BECTON DR		3. Date of (Month/Da 11/20/20	-	ansaction			Director X Officer (giv below) Sr. VP a		6 Owner er (specify 1nsel	
	(Street)	treet) 4. If Amendment, I Filed(Month/Day/Ye			-			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
FRANKLIN	NLAKES, NJ 074	17						Form filed by I Person	More than One Ro	eporting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution (Instr. 3) any		on Date, if TransactionAcquired (A Code Disposed o Day/Year) (Instr. 8) (Instr. 3, 4 a			d (A) or Securities d of (D) Beneficially , 4 and 5) Owned Following Reported		Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	11/20/2012			Code V A	Amount 4,268	or (D)	Price \$ 0	Transaction(s) (Instr. 3 and 4) 25,176	D		
Stock	11/20/2012			11	(1)	11	ψυ	23,170	D		
Common Stock								352 <u>(2)</u>	I	SIP Trust	

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.

## Edgar Filing: SHERMAN JEFFREY S - Form 4

 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	(			7. Title and Underlying (Instr. 3 and	Secu
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Ar or Nu of
Stock Appreciation Right	\$ 76.18	11/20/2012		А	48,727	11/20/2013 <u>(3)</u>	11/20/2022	Common Stock	4

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
	Director	10% Owner	Officer	Other		
SHERMAN JEFFREY S C/O BECTON, DICKINSON AND COMPANY 1 BECTON DRIVE FRANKLIN LAKES, NJ 07417			Sr. VP and General Counsel			
Signatures						
Richard Stout, by power of attorney for Jeffrey S.		11/21/	2012			

**Explanation of Responses:** 

\*\*Signature of Reporting Person

- \* 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) Represents restricted stock units awarded under the Becton, Dickinson and Company 2004 Employee and Director Equity-Based Compensation Plan.
- (2) Represents shares of common stock held under the Becton, Dickinson and Company Savings Incentive Plan (the "SIP"). The information presented for the SIP is as of October 31, 2012.

Date

(3) The stock appreciation rights vest in four annual installments beginning November 22, 2012.

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.

Sherman