#### LARSEN MARSHALL O

Form 4

January 25, 2018

### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB

**OMB APPROVAL** 

Number:

3235-0287

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Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* LARSEN MARSHALL O

2. Issuer Name and Ticker or Trading

Issuer

X\_ Director

5. Relationship of Reporting Person(s) to

Symbol

**BECTON DICKINSON & CO** 

(Check all applicable)

[BDX]

(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)

4. If Amendment, Date Original

A

Officer (give title below)

10% Owner Other (specify

C/O BECTON, DICKINSON AND COMPANY, 1 BECTON DRIVE

(Street)

(State)

01/23/2018

(Zip)

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year) Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting Person

D

FRANKLIN LAKES, NJ 07417

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)

(City)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Ownership Indirect (I) (Instr. 4) (Instr. 4)

Reported

Transaction(s) (Instr. 3 and 4)

Common 01/23/2018 Stock

Price Code V Amount (D) 941 (1) A

(A)

or

\$0

 $19,733^{(2)}$ 

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

#### Edgar Filing: LARSEN MARSHALL O - Form 4

9. Nu Deriv Secu

Own

Repo Trans (Instr

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Titl	le and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Da	ate Amou		int of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	r) (Instr. 8) Derivative Securities Acquired (A) or				Securities		(Instr. 5)	]
	Derivative							(Instr.	3 and 4)		(
	Security										J
											J
					Disposed						-
				of (D) (Instr. 3, 4, and 5)							(
									Amount		
									Amount		
						Date	Expiration	on Title Nun of	Or		
						Exercisable Date	Date		Number		
				C-J- V	(A) (D)						
				Coue v	(A) (D)				Shares		

# **Reporting Owners**

FRANKLIN LAKES, NJ 07417

Reporting Owner Name / Address

Director 10% Owner Officer Other

LARSEN MARSHALL O

C/O BECTON, DICKINSON AND COMPANY
1 BECTON DRIVE

### **Signatures**

Richard Stout, by power of attorney for Marshall Larsen

01/25/2018

\*\*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) Represents restricted stock units awarded under the Becton, Dickinson and Company 2004 Employee and Director Equity-Based Compensation Plan.
- (2) Includes units acquired through dividend reinvestment since the last report filed by the reporting person.

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.

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