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SMITH WA	AYNE T										
Form 4											
January 05,											
FORM	\mathbf{M} 4 UNITED	STATES	SECU	DITIFS /	ND FY	CHANCE	COMMISSIO	N.T.	PPROVAL		
	UNITED	SIAILS		ashington				N OMB Number:	3235-0287		
Check t					, 2101 2			Expires:	January 31,		
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								र .	2005		
subject to Statient of Charters in Derter Teral Ownershift of Section 16. SECURITIES							Estimated burden hou	•			
	Form 4 or							response	•		
Form 5 obligati	i neu pu						nge Act of 1934.				
may co				•	•	• •	of 1935 or Section	on			
See Inst	truction	30(h)	of the I	nvestment	t Compa	ny Act of 1	.940				
1(b).											
(Print or Type	e Responses)										
× • • •											
	Address of Reporting	g Person <u>*</u>	2. Issu	er Name an	d Ticker of	r Trading	5. Relationship of Reporting Person(s) to				
SMITH W	AYNE T		Symbol				Issuer				
			PRAX	AIR INC	[PX]		(Check all applicable)				
(Last)	(First)	(Middle)	ddle) 3. Date of Earliest Transaction				(en	een un uppneuer)		
			(Month/Day/Year)				_X_Director10% Owner				
C/O PRAXAIR, INC., 39 OLD			01/03/2012			Officer (give title Other (specify below) below)					
RIDGEBU	JRY ROAD										
(Street)				nendment, D	-	al	6. Individual or Joint/Group Filing(Check				
Filed(Month/Day/Year)						Applicable Line) _X_ Form filed by One Reporting Person					
DANBUR	Y, CT 06810-511	3					Form filed by	More than One R			
DINIDUK	1, 01 00010 511	.0					Person				
(City)	(State)	(Zip)	Tal	ble I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	e 2A. Deemo	ed	3.	4. Securit		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution	Date, if		FransactionAcquired (A) or		Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/Da	av/Year)	Code (Instr. 8)	Disposed (Instr. 3,		Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(Wond) De	iy/ i cui)	(11301:0)	(msu: 5,	r und 5)	Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Price	(instr. 5 and 1)				
Reminder: Re	eport on a separate lin	e for each cl	ass of sec	curities bene	ficially ow	ned directly	or indirectly.				
	•				-	-	spond to the colle	ection of	SEC 1474		
							tained in this form		(9-02)		
							ond unless the fo ntly valid OMB co				

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

number.

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(Instr. 3)	Price of (Mo Derivative Security		(Month/Day/Year)	(Instr.		Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					(]
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Deferred Stock	\$ 0 <u>(1)</u>	01/03/2012		А		231.803		(2)	(2)	Common Stock	231.803

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SMITH WAYNE T C/O PRAXAIR, INC. 39 OLD RIDGEBURY ROAD DANBURY, CT 06810-5113	X							
Signatures								
Anthony M. Pepper, Attorney-in-Fact		01/05/2012						
**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) Conversion to Praxair Common Stock is on a 1-for-1 basis.
- (2) Deferred stock units acquired by reporting person under the Praxair, Inc. Director's Fees Deferral Plan and are to be settled in Praxair Common Stock upon the reporting person's retirement or termination of service.
- (3) This total includes shares previously acquired through automatic dividend reinvestment under the Plan.

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.