Edgar Filing: BURZIK CATHERINE M - Form 4

BURZIK CA	THERINE M												
Form 4													
January 25, 2	018												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL				
Washington, D								OMB Number:	3235-0287				
Check this if no longe	ar .										January 31,		
subject to	STATE:	MENT O	F CHAN	GES IN BENEFICIAL OW					NERSHIP OF	Estimated a	2005 average		
Section 16		SECURITIES								burden hours per			
Form 4 or Form 5		repart to	Section 16	5(a) of t	he	Securiti	es Ex	chanc	ge Act of 1934,	response	0.5		
obligation	^s Section 17							-	f 1935 or Sectio	n			
may contin See Instru	nue.		of the Inv	•		•	• •						
1(b).	cuon												
(Print or Type R	esponses)												
DUDZIK CATHEDINE M				2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
			BECTON DICKINSON & CO [BDX]						(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest '	Tra	nsaction			_X_Director		6 Owner		
	N, DICKINSO , 1 BECTON D		(Month/Da 01/23/20	-					Officer (give below)	title Oth below)	er (specify		
	(Street)	(Street)			4. If Amendment, Date Original					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						
FRANKLIN	LAKES, NJ 07	7417							Person	Nore than One Ke	eporung		
(City)	(State)	(Zip)	Table	e I - Non	-De	rivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction Da			3. T		4. Securi			5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Yea	r) Execution any	Execution Date, if any			nAcquired Disposed			Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
		(Month/	Month/Day/Year)		(Instr. 8) (Instr. 3, 4 and 5)			5)	Owned Following Reported	ndirect (I) Instr. 4)	Ownership (Instr. 4)		
							(A) or		Transaction(s)				
				Code	V	Amount		Price	(Instr. 3 and 4)				
Common Stock	01/23/2018			А		941 <u>(1)</u>	А	\$0	7,259 (2)	D			

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.

 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)	4. Transact Code (Instr. 8)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	. ,	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships					
The bound of the state of the second	Director	10% Owner	Officer	Othe		
BURZIK CATHERINE M C/O BECTON, DICKINSON AND COMPANY 1 BECTON DRIVE FRANKLIN LAKES, NJ 07417	Х					
Signatures						
Richard Stout, by power of attorney for Catherine Burzik	M.	01/2	5/2018			
** Signature of Reporting Person		D	ate			

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).
- Represents restricted stock units awarded under the Becton, Dickinson and Company 2004 Employee and Director Equity-Based (1) 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.