#### DITKOFF JAMES H

Form 4

September 07, 2012

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FORM 4	UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OMB APPROVAL** 

OMB 3235-0287 Number: January 31,

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Expires:

Check this box if no longer subject to Section 16.

Form 4 or

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Washington, D.C. 20549

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Add DITKOFF JAI	ress of Reporting Person * MES H	2. Issuer Name <b>and</b> Ticker or Trading Symbol DANAHER CORP /DE/ [DHR]	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle)		3. Date of Earliest Transaction	(Check all applicable)			
		(Month/Day/Year)	Director 10% Owner			
	LVANIA AVENUE,	09/04/2012	X Officer (give title Other (specify below)			
NW, SUITE 800W			Senior VP-Finance & Tax			
	(Street)	4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check Applicable Line)			
		Filed(Month/Day/Year)				
WASHINGTO	ON, DC 20037		_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			

(City)	(State) (	Zip) Table	e I - No	n-D	erivative S	Securi	ties Ac	quired, Disposed	of, or Benefici	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2. Transaction Date 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		ties l (A) o l of (D 4 and	)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	09/04/2012		G	V	475	D	\$0	158,100	D	
Common Stock	09/04/2012		G	V	475	A	\$ 0	475	I	By trust for benefit of grandchild
Common Stock								5,217	I	By trust for benefit of grandchild
Common Stock								500	I	By trust for benefit of grandchild

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Common Stock	4,313	I	By trust for benefit of grandchild
Common Stock	3,649	I	By trust for benefit of grandchild
Common Stock	4,215	I	By trust for benefit of grandchild
Common Stock	4,215	I	By trust for benefit of grandchild
Common Stock	500	I	By trust for benefit of grandchild
Common Stock	120,800	I	By spouse
Common Stock	94,325	I	401(k) plan

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 required to respond unless the form displays a currently valid OMB control number.

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

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. Transact Code (Instr. 8)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	ate	7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

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

9. Nu Deriv Secu Bene Own Follo Repo Trans (Insti

(9-02)

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## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

DITKOFF JAMES H 2200 PENNSYLVANIA AVENUE, NW SUITE 800W

VP-Finance &

Senior

Tax

Signatures

WASHINGTON, DC 20037

James F. O'Reilly, attorney-in-fact for James H. Ditkoff

09/05/2012

\*\*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).

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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