Edgar Filing: DANAHER CORP /DE/ - Form 4

DANAHER	CORP /DE/											
Form 4												
July 08, 2014	1											
FORM	I A									-	PROVAL	
	UNITED	STATES				ND EXC).C. 205		IGE C	COMMISSION	OMB Number:	3235-0287	
Check thi										Expires:	January 31,	
subject to STATEMENT OF CHA				NGES IN BENEFICIAL OWN					NERSHIP OF	Estimated a	2005	
Section 1				SECU	Rľ	TIES				burden hou	•	
Form 4 or										response	. 0.5	
Form 5 obligatior	^							•	e Act of 1934,			
may conti	Section 17								f 1935 or Section	n		
See Instru	iction	30(h)	of the Inv	vestmen	it C	Company	Act	of 194	HO			
1(b).												
(Print or Type R	Responses)											
× 51	1 /											
1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relation DANIEL WILLIAM K Symbol Issuer DANAHER CORP / DE/ [DHR] 5. Relation					5. Relationship of Reporting Person(s) to Issuer							
				. Date of Earliest Transaction					(Check all applicable)			
(Last)	(11151)	(Wildule)	(Month/Da		Trai	Isaction			Director	10%	Owner	
2200 PENN	SYLVANIA AV	VENUE,	07/08/20	-					X Officer (give	e title Othe	er (specify	
NW, SUITE	2 800W								below)	below) EVP		
	(Sture et)		4 10 4	1	. .	0					(6) 1	
			If Amendment, Date Original ed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)				
			1 neu(mon	ui/Day/1e	ai)				_X_ Form filed by (One Reporting Pe	erson	
WASHING	FON, DC 20037	7							Form filed by M Person	fore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-	-De	rivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Da			3.					5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year	on Date, if Transaction(A) or Disposed of Code (D)						Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(IIIsu: 5)		any (Month/I	Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					5)	Owned	Indirect (I)	Ownership	
			•						Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported Transaction(s)			
							or		(Instr. 3 and 4)			
Common				Code		Amount	(D)	Price				
Common Stock	07/08/2014			А		20,665	А	\$0	139,228	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
DANIEL WILLIAM K 2200 PENNSYLVANIA AVENUE, NW SUITE 800W WASHINGTON, DC 20037			EVP				
Signatures							
James F. O'Reilly, attorney-in-fact for Wil Daniel II	07/08/2014						
**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).
- On February 21, 2013, the Compensation Committee of the Company's Board of Directors awarded the reporting person performance
 (1) based restricted stock units. This Form 4 is being filed in connection with the determination by the Compensation Committee that the performance criteria of the award have been achieved. The award remains subject to time-based vesting provisions.

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.