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Form 4												
September 0										OMB AF	PROVAL	
FORM	UNITED	STATES				ND EX D.C. 20		NGE C	OMMISSION	OMB Number:	3235-0287	
Check th	aor.									Expires:	January 31,	
Section 16. Form 4 or			F CHANGES IN BENEFICIAL OWN SECURITIES						ERSHIP OF Estimated burden hou response			
obligatio may cont <i>See</i> Instru 1(b).	ns Section 17(a	a) of the l		tility H	olc	ling Cor	npan	y Act of	e Act of 1934, 1935 or Section 0	I		
(Print or Type I	Responses)											
1. Name and A Bulanda Ma	Address of Reporting ark J	Person <u>*</u>	Symbol			Ticker or			5. Relationship of I Issuer			
(Last)	(First) (M	/liddle)	EMERSON ELECTRIC CO [EMR] 3. Date of Earliest Transaction					(Check	heck all applicable)			
((Month/Day/Year) 09/06/2017					Director 10% Owner X Officer (give title Other (specify below) below) VP-Acquisitions & Development			
				Amendment, Date Original l(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
ST. LOUIS	, MO 63136								Person		, or thing	
(City)	(State)	(Zip)	Tabl	le I - Nor	1-D	erivative	Secur	ities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		Code (Instr. 8	5)	4. Securi n(A) or Di (Instr. 3,	sposed 4 and (A) or	d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common					V	Amount 6,000	(D)	Price \$				
Stock	09/06/2017			M <u>(1)</u>		<u>(1)</u>	А	ф 53.835	116,329	D		
Common Stock	09/06/2017			F <u>(2)</u>		5,437 (2)	D	\$ 59.4	110,892	D		
Common Stock	09/06/2017			F <u>(3)</u>		28 <u>(3)</u>	D	\$ 59.4	110,864	D		
Common Stock									314.437	I	401(k) plan	
Common Stock									683.891	Ι	401(k) excess	

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Reminder: Report on	a separate line for eac	in 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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Num onof Deri Securit Acquir (A) or	ivative ties red	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and	Securities
	Security				(A) of Dispos (D) (Instr. 3 and 5)	sed of 3, 4,				
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shares
Employe Stock Option (Right to Buy)	\$ 53.835	09/06/2017		M <u>(1)</u>	6	5,000 (<u>1)</u>	10/01/2008 <u>(4)</u>	10/01/2017	Common Stock	6,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
1 0	Director	10% Owner	Officer	Other			
Bulanda Mark J C/O EMERSON ELECTRIC CO 8000 W. FLORISSANT AVENUE ST. LOUIS, MO 63136			VP-Acquisitions & Development				
Signatures							
/s/ John G. Shively, Attorney-in-Fac Bulanda	t for Mar	k J.	09/07/2017				
<u>**</u> Signature of Reporting Pers	on		Date				
Explanation of Resp	onses	S:					

* 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) Exercise of 871 non-qualified stock options and 5,129 incentive stock options exempt under Rule 16b-3.

plan

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- (2) Payment of option exercise price by delivering securities.
- (3) Shares withheld for taxes exempt under Rule 16b-3 resulting from nonqualified stock option exercise.
- (4) The options vested in three equal annual installments beginning on the date indicated.
- (5) Price is not applicable to stock options received as incentive compensation.

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.