Edgar Filing: STRYKER CORP - Form 4

STRYKER Form 4 March 23, 2 FORM Check 1 if no lo subject Section Form 4 Form 5 obligati	2016 M 4 UNITED this box nger to 16. or Filed pu	MENT OF rsuant to S	Wa F CHAI	ashingto NGES II SECU 16(a) of	n, D.C. 2 N BENEI VRITIES the Secur	0549 FICL	AL OWN Exchange	OMMISSION NERSHIP OF	OMB Number: Expires: Estimated burden ho response	ours per	
may co <i>See</i> Ins 1(b).	ntinue. Section 17			•	nt Compa	-	•	1935 or Sectio 0	n		
(Print or Type	e Responses)										
Floyd David Symbo			Symbol		nd Ticker o PRP [SYK		ling	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction								
			nth/Day/Year) 21/2016				Director 10% Owner X Officer (give title Other (specify below) Group President, Orthopaedics				
				f Amendment, Date Original ed(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 Person 			
(City)	(State)	(Zip)	Tal	ble I - Non	-Derivative	e Secu	rities Acq	uired, Disposed o	f, or Benefici	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transacti Code (Instr. 8) Code V	oror Dispos (Instr. 3, 4	ed of	(D)	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 Stock	03/21/2016			А	14,165 (1)	А	\$ 0 <u>(1)</u>	14,366 <u>(2)</u>	D		
Common Stock	03/21/2016			F	6,853	D	\$ 104.95	7,513	D		
Common Stock								139	Ι	By 401K	
Common Stock								5,436	I	By Family Limited Partnership	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Edgar Filing: STRYKER CORP - Form 4

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. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Floyd David 2825 AIRVIEW BLVD KALAMAZOO, MI 49002			Group President, Orthopaedics					
Signatures								

Lauren E. Keller, attorney-in-fact for David K. Floyd	03/23/2016	
**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) Shares issued upon vesting of Performance Stock Units, and related dividend equivalents, that were earned based on the achievement of pre-established three-year average adjusted diluted net earnings per share goals and sales performance goals.
- (2) Includes 201 shares of Stryker Common Stock acquired pursuant to Stryker Corporation's Employee Stock Purchase Plan ("ESPP") as of December 31, 2015, the date of the latest available statement of the reporting person's ESPP holdings.

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.