FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person Jones Christopher Ian Montague | | | | | 2. Issuer Name and Ticker or Trading Symbol BECTON DICKINSON & CO [BDX] | | | | | | | | | | ionship of Reporting Person(s) to Issuer all applicable) Director 10% Owne | | | /ner | |
|---|--|--|--|----|---|---|--|------|--|----------------|--|--|-------------|-------------------------------------|--|---|--------------------|--|--|
| (Last) | (First) | , | liddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 07/29/2022 | | | | | | | | | Officer (g below) | ive title | | Other (s below) | pecify | |
| C/O BECTON, DICKINSON AND COMPANY (Street) FRANKLIN | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Indiv | . Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| LAKES | NJ | 07 | 7417 | | | | | | | | | | | | | | | | |
| (City) | (State) | (Z | ip) | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| Date | | | | | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispose Code (Instr. | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 and | | | | | Form | Direct (D) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount (A) (C) | | (A) or (D) | Price | (Instr. 3 and 4) | | | | (111501.4) | |
| | 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 Dat if any (Month/Day/Ye | Co | Transaction Code (Instr. | | 5. Number of Derivative 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 Securities Underlying Derivative Security (Inst 3 and 4) | | | Derivative | 9. Number derivative Securities Beneficial Owned Following Reported | lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Co | ode | v | (A) | (D) | | | xpiration ate | | | Amount or Number of Shares | | Transaction(: (Instr. 4) | | | |
| Rights to Common Stock Under 1996 Directors Deferral Plan | (1) | 07/29/2022 | | | A | | 109 | | (2) | | (2) | Com Sto | nmon ock | 109 | \$244.31 | 8,768 | | D | |

Explanation of Responses:

- 1. The securities convert to common stock on a one-for-one basis.
- 2. The securities are distributed following termination of the reporting person's service as a director, or on the date or dates specified by the reporting person.

<u>Donna Kalazdy, by power of</u> <u>attorney for Christopher Jones</u>

10/18/2022

** Signature of Reporting Person

Date

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

- * 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.

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 Number.