(City)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

(State)

(Zip)

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

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

	ense conditions of Rule e Instruction 10.	•						
1	dress of Reporting Pe Lichael David	erson *	2. Issuer Name and Ticker or Trading Symbol BECTON DICKINSON & CO [BDX]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
I I		, ,	3. Date of Earliest Transaction (Month/Day/Year) 11/26/2024	X Officer (give title Other (specify below) EVP & President, Medical				
1 DECTON DRIVE		COMI AIVI	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) FRANKLIN LAKES	NJ	07417		X Form filed by One Reporting Person Form filed by More than One Reporting Person				
ı			I I	1				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	ate, Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
					Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	11/26/2024		A		2,553(1)	A	\$0.0	7,934	D	
Common Stock	11/26/2024		A		2,275(2)	A	\$0.0	10,209	D	
Common Stock	11/26/2024		F		1,230(3)	D	\$0.0	8,979	D	

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. Transac Code (In 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Stock Appreciation Rights	\$224.25	11/26/2024		A		10,004		11/26/2025 ⁽⁴⁾	11/26/2034	Common Stock	10,004	\$0.0	10,004	D	

Explanation of Responses:

- 1. Represents restricted stock units awarded under the Becton, Dickinson and Company 2004 Employee and Director Equity-Based Compensation Plan.
- 2. Represents shares received upon vesting of performance based equity award.
- 3. Represents shares withheld for payment of withholding taxes in connection with (A) vesting of the performance units referred to in footnote (2) and (B) the vesting of restricted stock units as previously reported on Table I.
- 4. The stock appreciation rights vest in four annual installments beginning November 26, 2025.

Donna Kalazdy, by power of attorney for Michael David

11/29/2024

Garrison

** 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.