FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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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

1. Name and Address of Reporting Person * FORLENZA VINCENT A					BE	Issuer Name and Ticker or Trading Symbol     BECTON DICKINSON & CO [ BDX ]      Date of Earliest Transaction (Month/Day/Year)									ationship of F c all applicab Director	le)	Person(	10% Ov		
(Last)	(First)	(Mi	ddle)			11/23/2013									Officer (g below)	ive title		Other (specify below)		
C/O BECTON, DICKINSON AND COMPANY															Chairman, CEO and President					
1 BECTON DRIVE				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) FRANKLIN														X		d by One F d by More	•	ng Person ne Reportin	g Person	
LAKES	NJ	07	417																	
(City)	(State)	(Zi	o)																	
		Та	ble I - Nor	n-Der	rivativ	e S	ecuritie	s Acq	uired,	Disp	osed of,	or E	3enefi	cially Ov	vned					
Date				th/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price	(Instr. 3 an				(Instr. 4)	
Common Stock 11/2:					23/201	23/2013			A		6,211(1)		Α	\$ <mark>0</mark>	114,935			D		
Common Stock 11/2:				23/2013				F		3,221(2)		D	\$0	111,714		D				
Common Stock												19,550			I	By GRAT				
Common Stock												9,782(3)			I	SIP Trust				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Security (Instr. 3) Conversion or Exercise (Month/Day/Year) if any			3A. Deemed Execution Da if any (Month/Day/\)	ate,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Da (Month/Day/Yo		e Securitie ear) Derivativ		. Title and Amount of ecurities Underlying erivative Security nstr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e s lly	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	or Ni		Amount or Number of Shares		(Instr. 4)				

## Explanation of Responses:

- 1. Represents shares vesting under performance units granted on November 23, 2010.
- 2. Represents shares withheld for payment of withholding taxes in connection with vesting of the performance units referred to in footnote (1).
- 3. Represents shares of common stock held under the Becton, Dickinson and Company Savings Incentive Plan (the "SIP"). The information presented for the SIP is as of October 31, 2013.

## Remarks:

Richard Stout, by power of attorney for Vincent A. Forlenza

11/26/2013

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.