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).

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 * Mas Ribo Alberto					2. Issuer Name and Ticker or Trading Symbol BECTON DICKINSON & CO [BDX] 3. Date of Earliest Transaction (Month/Day/Year)										5. Relationship of Reporting (Check all applicable) Director			10% Ow		
	1	(M SON AND COM	Middle)	11/25/2017								X	X Officer (give title Other (special below) below) EVP and Pres, Life Sciences							
1 BECTON DRIVE (Street) FRANKLIN LAKES NJ 07417					4. If Amendment, Date of Original Filed (Month/Day/Year)										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)) (Z	lip)																	
		Ta	able I - Noı	n-Deri	vativ	e S	ecuritie	s Acq	uired, I	Disp	osed of,	or Ber	efici	ally Ow	ned					
Da				Date	2. Transaction Date (Month/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				and 5) Securities Beneficially Following I		Form:	irect (I)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or	Price	Transaction (Instr. 3 and				(Instr. 4)	
Common Stock 11/2					25/2017				A		2,805	(1)	A \$0		20,125		D			
Common Stock 11/2				11/2	25/2017				F		2,1910	2)	D \$0		17,934		D			
Common Stock 11/2				11/2	/26/2017				A		1,192	3) A \$0		19,126		D				
Common Stock															2,03	8 ⁽⁴⁾		Ι	GSIP Trust	
Common Stock															1,055(5)		i) I		SIP Trust	
			Table II - I								sed of, o nvertible				ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Co	Transaction Code (Instr.				6. Date Ex Expiration (Month/Da	Date	Securities Underl		erlying	ying Derivative		er of e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Co	ode	V (A)			Date Exercisab		Expiration Date	Title		Amount or Number of Shares		Transaction(s) (Instr. 4)				
Stock Appreciation Rights	\$226.28	11/26/2017			A		11,424		11/26/201	8(6)	11/26/2027	Comm Stock		11,424	\$0	11,424		D		

Explanation of Responses:

- $1.\ Represents\ shares\ vesting\ under\ performance\ units\ granted\ on\ November\ 25, 2014.$
- 2. Represents shares withheld for payment of withholding taxes in connection with (A) vesting of the performance units referred to in footnote (1) and (B) the vesting of restricted stock units as previously reported on Table I.
- $3.\ Represents\ restricted\ stock\ units\ awarded\ under\ the\ Becton,\ Dickinson\ and\ Company\ 2004\ Employee\ and\ Director\ Equity-Based\ Compensation\ Plan.$
- 4. Represents shares of common stock held under the Becton, Dickinson and Company Global Share Investment Program (the "GSIP"). The information presented for the GSIP is as of May 31, 2017.
- 5. 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 July 31, 2017.
- 6. The stock appreciation rights vest in four annual installments beginning November 26, 2018.

Remarks:

Richard Stout, by power of attorney for Alberto Mas Ribo.

11/28/2017

** 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.