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J M SMUCk Form 4	KER Co										
June 11, 201									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287			
Check th if no long	aer.	STATEMENT OF CHANGES IN BENEFICIAL OWN							Expires:	January 31, 2005	
subject to Section 1 Form 4 o			SECUR	RITIES			Estimated average burden hours per response				
Form 5 obligatio may cont <i>See</i> Instru 1(b).	ns Section 17(a	a) of the l	Public U		ding Con	npan	y Act of	e Act of 1934, 1935 or Sectior 0	1		
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> DUNAWAY BARRY C			2. Issuer Name and Ticker or Trading Symbol J M SMUCKER Co [SJM]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	/liddle)		f Earliest Ti	-	-1		(Check	c all applicable)	
ONE STRAWBERRY LANE			(Month/Day/Year) 06/10/2015					Director 10% Owner X Officer (give title Other (specify below) President, International			
			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person			
ORRVILLE	Е, ОН 44667-0280)						Form filed by M Person	ore than One Rep	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secu	rities Acq	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	Code (Instr. 8)	4. Securit on(A) or Di (Instr. 3,	spose 4 and (A) or	d of (D) 5)	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 Shares	06/10/2015			Code V F	Amount 2,260 (1)	(D) D	Price \$ 111.58	43,636	D		
Common Shares								2,174.784	Ι	By 401(k)	
Common Shares								3,197.568	I	By Esop (3)	

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
Repo	rting C	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
DUNAWAY BARRY C ONE STRAWBERRY LANE ORRVILLE, OH 44667-0280			President, International				
Signatures							
/s/ Jeannette L.	06/1	1/2015					

/s/ Jeannette L.	06/11/2015
Knudsen, POA	00/11/201.

**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) Smucker common shares withheld by the Company to satisfy tax liability upon the vesting of restricted stock or restricted stock units, pursuant to The J. M. Smucker Company 2010 Equity and Incentive Compensation Plan.
- (2) This amount includes shares acquired under (i) the Company's 401(k) plan since the date of the reporting person's last ownership report and (ii) the Company's dividend reinvestment plan as administered by its transfer agent.
- (3) This amount includes shares acquired under the Company's dividend reinvestment plan, as administered by its transfer agent.

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.