Edgar Filing: McCormick Michael C. - Form 4

McCormick N	Michael C.										
Form 4											
December 07	, 2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								PPROVAL			
	Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287		
Check this if no long	or							Expires:	January 31, 2005		
subject to	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNER					NERSHIP OF	Estimated average burden hours per				
Section 16		SECURITIES									
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5	
obligation								of 1935 or Sectio	n		
may conti	nue.) of the Inv	•	.				11		
See Instru 1(b).	ction	20(11)	, or the m	estinent .	company	1100	. 01 17	10			
(Print or Type R	esponses)										
McCormick Michael C. Sym ECO			2. Issuer Name and Ticker or Trading Symbol ECOLAB INC. [ECL]				g	5. Relationship of Reporting Person(s) to Issuer			
				Earliest Tra	_			(Check all applicable)			
1 ECOLAB PLACE			(Month/Day/Year) 12/04/2018					Director	10%	6 Owner	
								XOfficer (give titleOther (specify below) below)			
								· · · · · · · · · · · · · · · · · · ·	GC & Secretar	ry	
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
			Filed(Mont	Filed(Month/Day/Year)				Applicable Line)			
								X Form filed by (One Reporting Po Jore than One Ro		
SAINT PAU	L, MN 55102							Person		eporting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction D	ate 2A. Dee	emed	3.	4. Securit	ies		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea	ar) Executi	on Date, if	Transactio					Form: Direct	Indirect	
(Instr. 3)		any (Month	/Day/Year)	Code (Instr. 8)	Disposed			Beneficially	(D) or Indirect (I)	Beneficial Ownership	
		(Monus	/Day/Teal)	(11150. 0)	(Instr. 3, 4	+ anu	5)	Owned Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported	` ´		
						or		Transaction(s)			
~				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common								51,528.162	D		
Stock											

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

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. Transactio Code (Instr. 8)	5. Number of 6. Date Exercisable and Derivative Expiration Date Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (Right to Buy)	\$ 158.515	12/04/2018		A	13,572	12/04/2019 <u>(1)</u>	12/04/2028	Common Stock	13,5

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
McCormick Michael C. 1 ECOLAB PLACE SAINT PAUL, MN 55102			EVP, GC & Secret	ary			
Signatures							
/s/ David F. Duvick, as Attorne McCormick	ey-in-Fact	for Michael	С.	12/07/2018			

<u>**Signature of Reporting Person</u>

* 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).

The option will be exercisable, on a cumulative basis, as to one-third of the option shares (excluding any fractional portion less than one

Date

(1) share), on each of the first and second anniversaries of the date of grant and as to the remaining shares on the third anniversary of the date of grant.

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.