

PHARMACIA CORP /DE/
Form 5
January 24, 2003

FORM 5

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

Form 3 Holdings Reported
 Form 4 Transactions Reported

**UNITED STATES SECURITIES
AND EXCHANGE COMMISSION**

Washington,
D.C. 20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the
Securities Exchange Act of 1934, Section 17(a) of the Public
Utility

Holding Company Act of 1935 or Section 30(h) of
the Investment Company Act of 1940

OMB APPROVAL

Edgar Filing: PHARMACIA CORP /DE/ - Form 5

OMB Number: 3235-0362

Expires: January 31,
2005
Estimated average burden

hours per response. . . . 1.0

1. Name and Address of Reporting
Person*

Carlucci, Frank C.

(Last)

(First)

(Middle)

100 Route 206 North

(Street)

Peapack, NJ 07977

(City)

(State)

(Zip)

2.
Issuer Name and
Ticker
or Trading Symbol

Pharmacia - PHA

3. I.R.S.
Identification
Number of
Reporting
Person, if an
entity

(Voluntary)

4. Statement for

(Month/Year)

12/2002

5. If Amendment,

Date of Original

(Month/Year)

Edgar Filing: PHARMACIA CORP /DE/ - Form 5

6. Relationship of Reporting
Person(s) to Issuer

(Check all
applicable)

Director

10% Owner

Officer (give title below)

Other (specify below)

7. Individual or Joint/Group Reporting
(check applicable
line)

Form Filed by One Reporting Person

Form Filed by

More than One Reporting Person

**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)

3. Transaction Code

(Instr. 8)

Edgar Filing: PHARMACIA CORP /DE/ - Form 5

4. Securities Acquired (A) or Disposed of
(D)

(Instr. 3, 4 and 5)

5. Amount of

Securities

Beneficially

Owned at the end of

Issuer's Fiscal Year

(Instr. 3 and 4)

6. Ownership

Form:

Direct (D)

or Indirect (I)

(Instr. 4)

7. Nature of

Indirect

Beneficial

Ownership

(Instr. 4)

Amount
(A) or
(D)
Price

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

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. Transaction Code
(Instr. 8)
5. Number of Derivative Securities Acquired (A) or Disposed of (D)
(Instr. 3, 4 and 5)
6. Date Exercisable and Expiration Date
(Month/Day/Year)
7. Title and Amount of Underlying Securities
(Instr. 3 and 4)
8. Price of Derivative Security
(Instr. 5)
9. Number of Derivative Securities Beneficially Owned at End of Year
(Instr. 4)
10. Ownership of Derivative Security:
Direct (D)
or Indirect (I)

Edgar Filing: PHARMACIA CORP /DE/ - Form 5

(Instr. 4)

11. Nature of
Indirect
Beneficial
Ownership
(Instr. 4)

(A) (D) Date

Exercisable Expiration

Date Title Amount or
Number of

Shares **Stock Equivalent Units1-for-106/18/2002 A1,868 (1) Common1,868\$40.133,193 (2)D**

Explanation of Responses: (1) Stock Equivalent Units acquired through the Directors' Equity Compensation and Deferral Plan.
(2) Includes reinvested dividends.

/s/ Don W. Schmitz, attorney-in-fact for Frank C. Carlucci 01/24/2003 ** Signature of Reporting Person Date

** 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.