Edgar Filing: PARRS MARIANNE M - Form 4

PARRS MAT	RIANNE M								
September 2	0. 2017								
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								PPROVAL	
	UNITED	STATES		RITIES A shington	N OMB Number:	3235-0287			
Check thi if no long subject to Section 1 Form 4 o	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: Estimated burden hou response	urs per		
Form 5 obligations may continue. See Instruction 1(b). 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									
(Print or Type I	Responses)								
1. Name and Address of Reporting Person <u>*</u> PARRS MARIANNE M			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer		
			STANLEY BLACK & DECKER, INC. [SWK]				(Check all applicable)		
(Last) (First) (Middle) 1000 STANLEY DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 09/19/2017			X_ Director 10% Owner Officer (give title Other (specify below) below)			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW BRIT	AIN, CT 06053						Form filed by Person	More than One R	eporting
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)2. Transaction I (Month/Day/Ye		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)	Disposed (Instr. 3, 4	ecurities 5. Amount of puired (A) or Securities posed of (D) Beneficially tr. 3, 4 and 5) Owned Following (A) Reported Transaction(s) or (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V	Amount	(D) Price	(Instr. 5 and 4)		
Reminder: Rep	ort on a separate line	e for each cl	ass of sec	urities bene	-	-	-	otion of	SEC 1474
					inform requir	nation cont ed to respo	spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	1

number.

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Disposed of	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				(I
				Code V	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Deferred Shares	<u>(1)</u>	09/19/2017	09/19/2017	А	18.8771		(2)	(3)	Common Stock	18.8771 \$

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
PARRS MARIANNE M 1000 STANLEY DRIVE NEW BRITAIN, CT 06053	Х							
Signatures								
/s/ Kathryn P. Sherer, Attorney-in-Fact		09/20/20	17					
**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) Fair market value on date established in Plan with respect to payment of fee or dividend
- (2) Currently 100% vested
- (3) The reporting director will receive common stock of the corporation on the first business day of the calendar year immediately following the year in which he or she ceases to be a director

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.