J M SMUCKER Co Form 4 March 03, 2015

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** OMB

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Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

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 may continue. See Instruction

30(h) of the Investment Company Act of 1940

1(b).

**Shares** 

(Print or Type Responses)

1 Name and Address of Departing De

1. Name and Address of Reporting Person *  Jackson Kevin G			2. Issuer Name and Ticker or Trading Symbol J M SMUCKER Co [SJM]					5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last)		_	(Month/D	-	ransaction			(Check all applicable)  Director 10% Owner _X_ Officer (give title Other (specify				
ONE STRAWBERRY LANE			02/27/2015					below) below)  Vice President				
				ndment, D hth/Day/Yea	ate Origina	1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
ORRVILLE	Е, ОН 44667							Form filed by N Person	Nore than One Re	porting		
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		Date, if	3. Transacti Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Shares	02/27/2015			S	875	D	115.2 (1)	3,391.337 (2)	D			
Common Shares								1,579.752	I	By 401(k)		
Common Shares								1,171.685	I	By ESOP		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form

(2)

#### Edgar Filing: J M SMUCKER Co - Form 4

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#### 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. Transacti Code (Instr. 8)	Securities Acquired (A) or Disposed of (D)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(Instr. 3, 4, and 5)  (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

Jackson Kevin G

ONE STRAWBERRY LANE Vice President

ORRVILLE, OH 44667

## **Signatures**

/s/ Jeannette L. 03/03/2015 Knudsen

\*\*Signature of Reporting Date Person

### **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).
- The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$115.20 and \$115.22, inclusive. The reporting person undertakes to provide to The J. M. Smucker Company, any shareholder of The J. M. Smucker Company, or the staff of the Securities and Exchange Commission, upon request, full information regardign the number of shares sold at each separate price within the ranges set forth in this footnote.
- (2) This amount includes shares acquired under the Company's dividend reinvestment plan, as administered by its transfer agent.
- 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.

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.

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