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Form 4 May 10, 200		CO	3		-			-	OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB Number:	3235-0287		
Check th		Washington, D.C. 20549								January 31,	
if no lon subject t Section Form 4 o	o SIATEN 16. pr	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								: 2005 ed average hours per se 0.5	
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	Responses)										
ANDREOTTI LAMBERTO Symbol				er Name and Ticker or Trading OL MYERS SQUIBB CO				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (N	Middle)	3. Date of Earliest Transaction Director						10% Owner		
(Month/E BRISTOL-MYERS SQUIBB 05/08/2 COMPANY, RT. 206 & PROVINCELINE ROAD				below)				below)	Officer (give title Other (specify below) EVP BMS & President WW Pharm		
(Street) 4. If Ame				endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
(City)		(Zin)						Person			
		(Zip)					-	iired, Disposed of,		-	
1.Title of Security (Instr. 3)		ansaction Date 2A. Deemed th/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securit on(A) or Dia (Instr. 3, 4	sposed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, \$0.10 par value	05/08/2007			Code V	Amount 30,000	(D)	Price \$ 28.9	(Instr. 3 and 4) 287,497 (1)	D		
Common Stock, \$0.10 par value	05/08/2007			F	28,700 (2)	D	\$ 30.21	258,797 <u>(1)</u>	D		
Common Stock,	05/08/2007			F	622 <u>(3)</u>	D	\$ 30.21	258,175 <u>(1)</u>	D		

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\$0.10 par value

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)

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 orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Derivative Expiration Date Gecurities (Month/Day/Year) Acquired (A) or Disposed of D) Instr. 3, 4,		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Option (right to buy)	\$ 28.9	05/08/2007		М	30,000	06/04/2005 <u>(4)</u>	06/03/2007	Common Stock, \$0.10 par value	30,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
ANDREOTTI LAMBERTO BRISTOL-MYERS SQUIBB COMPANY RT. 206 & PROVINCELINE ROAD PRINCETON, NJ 08540			EVP BMS & President WW Pharm				
Signatures							
By: /s/ Sonia Vora, Attorney-in-Fact	05/10/2007	7					

<u>**</u>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) Includes unvested restricted stock awards.

(2) Shares withheld for payment of exercise price.

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- (3) Shares withheld for payment of taxes upon exercise of stock option.
- (4) Exercisable on the earlier of (i) three years from the date of grant or (ii) the date on which the closing share price achieves \$50.00 or above for seven consecutive trading days.

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.