Edgar Filing: JOHNSON CONTROLS INC - Form 4

JOHNSON Form 4 January 29,	CONTROLS INC 2016	C								
FORM	ЛЛ							OMB A	PPROVAL	
	UNITED	STATES		RITIES A shington			E COMMISSIO	N OMB Number:	3235-0287	
Check t if no lot subject Section Form 4 Form 5 obligati may co <i>See</i> Inst 1(b).	nger to 16. or Filed pur ons ntinue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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							January 31, 2005 ted average hours per se 0.5	
(Print or Type	Responses)									
1. Name and Goodman	Person *	2. Issuer Name and Ticker or Trading Symbol JOHNSON CONTROLS INC [JCI]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (Middle)	3. Date of	of Earliest T	ransaction		(Cli	eck an applicabl	e)	
5757 N. GREEN BAY AVENUE, P.O. BOX 591			(Month/Day/Year) 01/27/2016				X_ Director10% Owner Officer (give titleOther (specify below)Other (specify			
		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 Form filed by More than One Reporting 				
MILWAU	KEE, WI 53201						Person		·r····8	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or 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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	Perso infor requi	ons who res nation cont red to resp	or indirectly. spond to the colle tained in this forr ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)	

number.

 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	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed (D) (Instr. 3, and 5)	d of				
				Code N	/ (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock Units / Directors' Deferred Compensation Plan	<u>(1)</u>	01/27/2016		A	4,127		<u>(2)</u>	<u>(2)</u>	Common Stock	4,127
Plan Reporting	a Owne	ors								

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips		
	Director	10% Owner	Officer	Other	
Goodman Richard 5757 N. GREEN BAY AVENUE P.O. BOX 591 MILWAUKEE, WI 53201	Х				
Signatures					
/s/ Angela M. Blair, Attorney-in-Fa Goodman	act for Rid	chard		01/29/2016	
<u>**</u> Signature of Reporting P			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) Each unit of phantom stock is the economic equivalent of one share of Johnson Controls common stock.

The phantom stock units accrue under the Johnson Controls Directors' Deferred Compensation Plan and settle 100% in cash upon the (2) reporting person's retirement. The reporting person has the right to transfer the value of the phantom stock account into an alternative investment account within the plan.

(3) The balance includes 733.645 phantom stock units acquired via dividend reinvestment on April 2, July 2 and October 2, 2015 and January 5, 2016, at prices ranging from \$38.58 to \$50.16 per unit.

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.