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STAFSTR	OM STEVEN J										
Form 4	2012										
March 04, 2											
FOR	VI 4 _{UNITED}) STATES		OMB APPROVAL							
				ashingto					Number:	3235-0287	
Check if no lo	this box		Expires:	January 31,							
subject		MENT O		Estimated average 2005							
Section		SECU	RITIES	burden h	burden hours per						
Form 4 Form 5	Section	16(a) of 1	the Secu	rities	Exchange	e Act of 1934	response	0.5			
	obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section										
may co <i>See</i> Ins	ntinue. truction			•	•	-	Act of 194				
1(b).											
(Print or Type	e Responses)										
1. Name and Address of Reporting Person [*] 2. Issuer Name and T					nd Ticker	or Tra	ding	5. Relationship of	f Reporting P	erson(s) to	
STAFSTR	Symbol STANLEY BLACK & DECKER, INC. [SWK]					Issuer					
						(Check all applicable)					
(Last)	(First)	(Middle)	Middle) 3. Date of Earliest Transaction					Director 10% Owner X Officer (give title Other (specify			
1000 STANLEY DRIVE (Street)			(Month/Day/Year) 02/28/2013					below) below) VP Ops CDIY & Emerging Mkts			
				Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person		
NEW BRI	TAIN, CT 06053							Form filed by M Person	More than One	Reporting	
(City)	(State)	(Zip)	Ta	ble I - Non	-Derivativ	ve Sec	urities Acq	uired, Disposed o	f, or Benefic	ially Owned	
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution D any (Month/Day			Date, if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5)				(D)	SecuritiesOBeneficiallyFOwnedIFollowingCReported(6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
a				Code V	Amount	or (D)	Price	(Instr. 3 and 4)	()		
Common Stock	02/28/2013			S	2,800	D	\$ 78.1289	24,876	D		
Common Stock (1)								1,871.1133	I	Through Computershare Under ESPP	

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

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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. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	umber Expiration Date (Month/Day/Year) erivative ecurities coquired a) or isposed (D) nstr. 3,		7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Interest in Employer Stock Fund (Supplemental Plan) (2)	(3)					(3)	(3)	Common Stock	215.1841

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
STAFSTROM STEVEN J 1000 STANLEY DRIVE NEW BRITAIN, CT 06053			VP Ops CDIY & Emerging Mkts				
Signatures							
/s/ Bruce H. Beatt,		03/04/2013					

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).

Aggregate number of shares held in ESPP as of the last day of the calendar month that ended at least 10 days prior to the date of this report, including shares acquired or disposed of on various dates since balance was last reported. Because interest in Plan is denominated

(1) report, including shares acquired of disposed of on various dates since balance was last reported. Because interest in r fair is denomination in cash, fluctuation in share price since the balance was last reported may have resulted in either an increase or decrease in associated number of shares.

Represents shares held for the reporting person under the Company's Supplemental Plan as of the last day of the calendar month that (2) ended at least 10 days prior to the date of this report, including shares acquired or disposed of on various dates since balance was last reported.

(3) Exempt

Attorney-in-Fact

**Signature of Reporting Person

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.