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STRYKER Form 4 August 29,													
FORN	ЛЛ		SEQU	DITIEC		CILA	NCEC	OMMESION		PPROVAL			
Washington, D.C. 20549								OMB Number:	3235-0287				
Check this box if no longer subject to Section 16. Form 4 or				NGES I	N BENEF	ICIA	L OWN	ERSHIP OF	Expires:	January 31, 2005			
				SECU	JRITIES				Estimated burden hou response	irs per			
Form 5 obligati may con <i>See</i> Inst 1(b).	ons ntinue. Section 17	(a) of the P	ublic U	Jtility H		npany	Act of	2 Act of 1934, 1935 or Sectior 0	l				
(Print or Type	Responses)												
1. Name and Address of Reporting Person <u>*</u> STRYKER JON L			2. Issuer Name and Ticker or Trading Symbol STRYKER CORP [syk]					5. Relationship of Reporting Person(s) to Issuer					
(Last)					Transaction			(Check all applicable)					
			(Month/Day/Year) 08/28/2006					Director X 10% Owner Officer (give title below) Other (specify below)					
VALAMA	(Street) ZOO, MI 49002			endment, onth/Day/Y	Date Origina Tear)	1		6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by M	ne Reporting P	erson			
(City)	(State)	(Zip)	Tak	ala I Nor	n Dorivativa	Soour		Person iired, Disposed of,	or Bonoficio	lly Ownod			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	-	ate, if	3.	4. Securitio ionor Dispose (Instr. 3, 4	es Acq d of (E	uired (A) 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)			
Common Stock	08/28/2006			S	150,000	D	\$ 48.073	7,776,720	I	By Revocable Trust			
Common Stock								24,132,175	I	By L. Lee Stryker Trust			
Common Stock								47,000	Ι	By Charitable Lead Annuity Trust			

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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)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				, ,	Date Exercisable	Expiration Date	Title	Amount or Number of		

Code V (A) (D)

Reporting Owners

Reporting Owner Name / Addr	'ess	Relationsh		
	Director	10% Owner	Officer	Other
STRYKER JON L				
2725 FAIRFIELD ROAD		Х		
KALAMAZOO, MI 49002				
Signatures				
Jon L. Stryker	08/29/2006			
**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).

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.

Shares