Carpenter Lonny J Form 3 December 09, 2008

## FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**SECURITIES** 

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person \* Statement STRYKER CORP [SYK] A Carpenter Lonny J (Month/Day/Year) 12/01/2008 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) 2825 AIRVIEW BLVD. (Check all applicable) (Street) 6. Individual or Joint/Group Filing(Check Applicable Line) 10% Owner Director \_X\_ Form filed by One Reporting \_X\_\_ Officer Other Person (give title below) (specify below) KALAMAZOO, MIÂ 49002 Form filed by More than One **Group President** Reporting Person (City) (State) (Zip) **Table I - Non-Derivative Securities Beneficially Owned** 1. Title of Security 2. Amount of Securities 4. Nature of Indirect Beneficial (Instr. 4) Beneficially Owned Ownership Ownership (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) Common Stock D Â 13,193 Common Stock 1,667 I By 401k Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. Persons who respond to the collection of information contained in this form are not

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

required to respond unless the form displays a

currently valid OMB control number.

3. Title and Amount of 1. Title of Derivative Security 2. Date Exercisable and 6. Nature of Indirect (Instr. 4) **Expiration Date** Securities Underlying Conversion Ownership Beneficial Ownership (Month/Day/Year) **Derivative Security** or Exercise Form of (Instr. 5) (Instr. 4) Price of Derivative Derivative Security:

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|              | Date<br>Exercisable | Expiration<br>Date | Title           | Amount or<br>Number of<br>Shares | Security | Direct (D)<br>or Indirect<br>(I)<br>(Instr. 5) |   |
|--------------|---------------------|--------------------|-----------------|----------------------------------|----------|--|---|
| Common Stock | (1)                 | 04/28/2012         | Common<br>Stock | 20,000                           | \$ 26.4  | D  | Â |
| Common Stock | (1)                 | 10/13/2013         | Common<br>Stock | 16,000                           | \$ 38.83 | D  | Â |
| Common Stock | (1)                 | 03/04/2014         | Common<br>Stock | 14,000                           | \$ 45.21 | D  | Â |
| Common Stock | (1)                 | 04/21/2015         | Common<br>Stock | 15,000                           | \$ 48.27 | D  | Â |
| Common Stock | (1)                 | 02/06/2016         | Common<br>Stock | 16,500                           | \$ 46.85 | D  | Â |
| Common Stock | (1)                 | 02/13/2017         | Common<br>Stock | 18,000                           | \$ 62.65 | D  | Â |
| Common Stock | (1)                 | 02/11/2018         | Common<br>Stock | 22,000                           | \$ 67.8  | D  | Â |

## **Reporting Owners**

| Reporting Owner Name / Address                                   | Relationships |           |                 |       |  |  |
|--|---------------|-----------|-----------------|-------|--|--|
| 1  | Director      | 10% Owner | Officer         | Other |  |  |
| Carpenter Lonny J<br>2825 AIRVIEW BLVD.<br>KALAMAZOO Â MIÂ 49002 | Â             | Â         | Group President | Â     |  |  |

## **Signatures**

Reporting Person

Lonny J.
Carpenter

\*\*Signature of Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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) Employee stock option granted pursuant to the Stryker Corporation 1998 Stock Option Plan, exercisable as to 20% on each of the first five anniversaries of the date of grant.

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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