Edgar Filing: GARGALLI CLAIRE W - Form 4

GARGALL Form 4	LI CLAIRE W										
April 27, 20								OMB A	PPROVAL		
FORN Check t	UNITED	STATES		RITIES A			E COMMISSIO	N OMB Number:	3235-028 January 3		
if no longer subject toSTATEMENT OF CHANGES IN BENEFIC SECURITIESSection 16. Form 4 or Form 5SECURITIESFiled pursuant to Section 16(a) of the Securities					s rities Excha	ange Act of 1934	Estimated burden hou response	200 average urs per			
obligati may con <i>See</i> Inst 1(b).	ntinue. Section 17			•	•	ompany Ac any Act of	t of 1935 or Sect 1940	ion			
(Print or Type	Responses)										
1. Name and GARGAL	Person *	2. Issuer Name and Ticker or Trading Symbol PRAXAIR INC [PX]				5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (Middle)	3. Date of Earliest Transaction			on	(Check all applicable)				
C/O PRAX RIDGEBU	LD	(Month/Day/Year) 04/27/2010				X_ Director 10% Owner Officer (give title Other (specify below) below)					
				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				
DANBUR	Y, CT 06810-511	3					Form filed by Person	More than One R	eporting		
(City)	(State)	(Zip)	Tat	ole I - Non-J	Derivati	ve Securities	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8)	Dispose (Instr. 3	ed (A) or ed of (D) 3, 4 and 5) (A) or	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)		
				Code V		. ,					
Reminder: Re	eport on a separate lin	e for each cl	ass of sec	urities bene	Pers info requ	sons who re rmation con uired to resp	or indirectly. spond to the collected tained in this forr ond unless the fo ently valid OMB co	n are not orm	SEC 1474 (9-02)		

 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	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onof Derivative	Expiration Date	Underlying Securities	Deriva
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Securi

number.

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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					(Instr.
			Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Stock	\$ 0 <u>(1)</u>	04/27/2010	А	1,560		(2)	(2)	Common Stock	1,560	\$ 0

Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
GARGALLI CLAIRE W C/O PRAXAIR, INC. 39 OLD RIDGEBURY ROAD DANBURY, CT 06810-5113	Х			
Signatures				
Anthony M. Pepper, Attorney-in-Fact		04/27/2010		

<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) Conversion to Praxair Common Stock is on a 1-for-1 basis.

Deferred stock units acquired by reporting person under the Praxair, Inc. Director's Fees Deferral Plan (the "Plan") that vest on the day(2) before the first annual shareholders' meeting occurring after the April 27, 2010 grant date, assuming continued service as a director through such date, and after vesting are to be settled in Praxair Common Stock after a minimum of three (3) years from the date of grant.

(3) This total includes shares previously acquired through automatic dividend reinvestment under the Plan.

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.