EMERSON ELECTRIC CO

Form 4

February 10, 2010

FORM 4

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

OMB Number: 3235-0287

Estimated average

burden hours per

5 Relationship of Reporting Person(s) to

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

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

response... 0.5

1(b).

Common

Common

Common

Stock

Stock

Stock

02/08/2010

(Print or Type Responses)

1 Name and Address of Reporting Person *

See Instruction

SCHLUETER RICHARD J			Symbol	er Name an SON EL			I	Issuer				
	(Last)	(First)	(Middle)		of Earliest	Γransaction	1		(Check all applicable)			
C/O EMERSON ELECTRIC CO., 8000 W FLORISSANT				(Month/I 02/08/2	Day/Year) 2010			_	Director 10% Owner X Officer (give title Other (specify below)			
(Street)				Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
	ST. LOUIS	, MO 63136					Ī	Form filed by More than One Reporting Person				
	(City)	(State)	Tab	le I - Non-	Derivativ	e Secu	rities Acqui	quired, Disposed of, or Beneficially Owned				
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transacti Code (Instr. 8)	onor Dispo (Instr. 3,	osed of , 4 and (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)	
	Common Stock	02/08/2010			M(1)	6,000 (1)	A	\$ 21.2813	50,147	D		
	Common Stock	02/08/2010			F(2)	2,847 (2)	D	\$ 44.84	47,300	D		

 $F^{(3)}$

173 (3) D

\$ 44.84

47,127

1,706.481

560.245

D

I

I

401(k)

401(k)

excess

plan

plan

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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.

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 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)	Secu Acqu (A) o Disp (D)	urities uired or oosed of r. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shares
Employee stock option (right to	\$ 21.2813	02/08/2010		M <u>(1)</u>		6,000 (1)	10/06/2001(4)	03/06/2010	Common Stock	6,000

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SCHLUETER RICHARD J C/O EMERSON ELECTRIC CO. 8000 W FLORISSANT ST. LOUIS, MO 63136

VP & Chief Accounting Officer

Signatures

buy)

Timothy G. Westman, Attorney-in-Fact for Richard J.
Schlueter

02/10/2010

**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) Exercise of 5,144 incentive stock options and 856 non-qualified stock options exempt under Rule 16b-3.
- (2) Payment of option exercise price by delivering securities.
- (3) Shares withheld for taxes exempt under Rule 16b-3 resulting from non-qualified stock option exercise.

Reporting Owners 2

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- (4) The options vested in three equal annual installments beginning on the date indicated.
- (5) Price is not applicable to stock options received as incentive compensation.

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.