## Edgar Filing: PRAXAIR INC - Form 4

PRAXAIR Form 4	INC											
April 05, 20	)16											
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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									N OMB Number:	3235-	0287	
Check the check									Expires:	Januar	ƴ 31, 2005	
if no longer subject to Section 16. Form 4 or								Estimated burden hou	Estimated average burden hours per response 0.			
Form 5 obligations may continue. See Instruction 1(b). 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												
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u></u> DICCIANI NANCE K			2. Issuer Name <b>and</b> Ticker or Trading Symbol				ng	5. Relationship of Reporting Person(s) to Issuer				
	PRAXAI			AIR INC [PX]			(Check all applicable)					
(Last) (First) (Middle) C/O PRAXAIR, INC., 39 RIDGEBURY ROAD			<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>04/01/2016</li></ul>			X_ Director 10% Owner Officer (give title Other (specify below) below)						
(Street) 4				4. If Amendment, Date Original Filed(Month/Day/Year)			<ul><li>6. Individual or Joint/Group Filing(Check</li><li>Applicable Line)</li><li>_X_ Form filed by One Reporting Person</li></ul>					
DANBUR	Y, CT 06810-511	3						Form filed by Person	More than One R	eporting		
(City)	(State)	(Zip)	Tał	ole I - Non-l	Derivati	ve Secur	ities A	cquired, Disposed	of, or Beneficia	lly Owned	1	
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)	Dispos			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect Beneficia Ownershi (Instr. 4)	ıl	
				Code V	Amour		Price	(Instr. 3 and 4)				
Reminder: Re	port on a separate lin	e for each cl	ass of sec	urities bene	ficially o	owned dir	ectly of	or indirectly.				
					info req	ormation uired to	resp	spond to the collect tained in this form ond unless the fo ntly 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 of	6. Date Exercisable and	7. Title and Amount of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securities	
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	

number.

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(Instr. 3)	Price of Derivative Security	ive		(Instr. 8	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					(
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Deferred Stock Unit	\$ 0 <u>(1)</u>	04/01/2016		А		249.479		(2)	(2)	Common Stock	249.479

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
DICCIANI NANCE K C/O PRAXAIR, INC. 39 RIDGEBURY ROAD DANBURY, CT 06810-5113	Х							
Signatures								
Anthony M. Pepper, Attorney-in-Fact		04/05/2016	5					

\*\*Signature of Reporting Person

## **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).

Date

- (1) Conversion to Praxair Common Stock is on a 1-for-1 basis.
- (2) Deferred stock units acquired by reporting person under the Praxair, Inc. Director's Fees Deferral Plan and are to be settled in Praxair Common Stock upon the reporting person's retirement or termination of service.
- (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.