FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
--------------

OMB Number: 3235-0287 Estimated average burden

## Check this box if no longer subject to Section 16. Form 4 or Form 5

JOHNSON & JOHNSON DEVELOPMENT

(Middle)

08933

(First)

ONE JOHNSON & JOHNSON PLAZA

NJ

**CORP ET AL** 

(Street) NEW

BRUNSWICK

🔲 obligat	ions may continution 1(b).			File							curities Exchar Company Act					L	hours per	respons	e:	0.5
	SON & JO	Reporting Person*  OHNSON  irst) (	Middle	5)	2. <u>A</u>	Issue	r Name a	and T	icker or	Tradi	ng Symbol				Relationshi heck all app Direc Offic belov	olicable) ctor er (give		X 1	.0% O	
	•	JOHNSON PLA		•)		Date (		st Tra	ınsactio	n (Mo	nth/Day/Year)					,			,	
Street) NEW BRUNS			)8933	3	4.	If Ame	endment	, Dat	e of Oriç	ginal F	Filed (Month/D	ay/Year)				n filed b	Group Fil y One Ro y More th	eporting	Perso	on .
(City)	(5)		Zip)   <b>e l -</b>	Non-Deriv	vativ	e Se	curitie	s A	cquir	ed, [	Disposed o	of, or E	Benefi	cia	ılly Owne	ed				
L. Title of S	Security (Ins	tr. 3)		2. Transacti Date (Month/Day		Exec if an	Deemed cution Da y nth/Day/Y	,	3. Transa Code ( 8)		4. Securities Disposed Of 5)			d	5. Amount of Securities Beneficially Owned Foll Reported	,	6. Owner Form: D (D) or Ir (I) (Insti	Direct ndirect	Indire Bene	ficial ership
									Code	v	Amount	(A) or (D)	Price		Transaction (Instr. 3 and				(IIISU	· <del>•</del> )
Common	Stock			11/25/20	014				S		1,500	D	\$7.8 <sup>(2</sup>	2)	1,381,0	094	I		Johr Dev	ason & ason elopment poration <sup>(1)</sup>
Common	mmon Stock			11/26/2014					S		500	D	\$7.6	5	1,380,594		I	I Jo		ison & ison elopment poration <sup>(1)</sup>
		Ta	ble I								sposed of, , convertil				/ Owned					
Title of Derivative Security Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if any	Deemed ution Date, / th/Day/Year)		saction e (Instr		rative rities rired r osed ) r. 3, 4	Expi (Mon	ration	ercisable and Date y/Year)	Amour Securi Under Deriva	Amount of Securities Underlying Derivative Security (Instr. 3		Derivative Security (Instr. 5) Benefi Owner Follow Repor		ities Form: icially Direct or Ind ving (I) (Instead action(s)		(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	e V	(A)	(D)	Date Exer	cisabl	Expiration e Date	Title	Amoun or Numbe of Shares	er						
		Reporting Person*  OHNSON																		
(Last)	HNSON &	(First) JOHNSON PLA		(Middle)																
Street) NEW BRUNSV	WICK	NJ	(	08933																
(City)		(State)	(	(Zip)																
Name ar	nd Address of	Reporting Person*				]														

(City) (State)	(Zip)
----------------	-------

## Explanation of Responses:

- 1. The securities reported as being indirectly beneficially owned by the designated Reporting Person are directly beneficially owned by Johnson & Johnson Development Corporation, a wholly-owned subsidiary of the designated Reporting Person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$7.70 to \$7.85. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

## Remarks:

Douglas Chia, Secretary of Johnson & Johnson 11/26/2014

Steven M. Rosenberg, Secretary of Johnson &

11/26/2014

Johnson Development Corporation

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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.

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 Number.