FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: Estimated average burden 0.5 hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Adda Purvis Edga | ress of Reporting Pers ar <u>M Jr</u> | son* | 2. Issuer Name and Ticker or Trading Symbol <u>EMERSON ELECTRIC CO</u> [EMR] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Cofficer (give title Other (specify |
|---------------------------------|---|----------------|---|---|
| (Last) 8000 W. FLOF | st) (First) (Middle) 00 W. FLORISSANT AVENUE | | 3. Date of Earliest Transaction (Month/Day/Year) 09/07/2016 | Exec. Vice President and COO |
| (Street) ST LOUIS (City) | MO (State) | 63136 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transac Code (I 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|--------------------------------|---|--|---------------|-------|--|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 09/07/2016 | | G ⁽¹⁾ | v | 1,400 ⁽¹⁾ | D | (2) | 115,612 | D | |
| Common Stock | | | | | | | | 167.421 | Ι | 401(k) Plan |
| Common Stock | | | | | | | | 737.199 | I | 401(k) Excess Plan |
| Common Stock | | | | | | | | 15,400 | I | Spouse |
| Common Stock | | | | | | | | 400 | I | Trust-Son |

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. Transac Code (li 8) | | Derivative Expiration | | 6. Date Exerc Expiration Da (Month/Day/N | ate | e Securities Underlying | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
|--|---|--|---|---------------------------------|---|-----------------------|-----|--|--------------------|-------------------------|----------------------------------|---|--|--|---------------------------------------|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | | |

Explanation of Responses:

1. Bona fide gift by the Reporting Person of 1,400 shares to the Emerson Directors' and Officers' Charitable Trust

2. Price is not applicable to acquisitions or dispositions resulting from bona fide gifts.

Remarks:

/s/ John G. Shively, as Attorney-in-09/28/2016

Fact for Edgar M. Purvis, Jr. ** 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.

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