FORM 4

### **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

	ROVAI

OMB Number:	3235-0287			
Estimated average burden				
hours per response:	0.5			

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Address Button Bell Ka	. 0		2. Issuer Name and Ticker or Trading Symbol EMERSON ELECTRIC CO [ EMR ]	(Check a	ionship of Reporting Person( all applicable) Director Officer (give title	(s) to Issuer  10% Owner Other (specify							
(Last) C/O EMERSON E 8000 W. FLORRIS		(Middle)	EMERSON ELECTRIC CÓ [ EMR ]  (Check all applicable) Director  X Officer (give below)  3. Date of Earliest Transaction (Month/Day/Year)  11/30/2017  4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Gr  X Form filed by	Sr. VP & Chief Mar	below) keting Off.								
(Street) ST. LOUIS MO 63136  (City) (State) (Zip)			4. If Amendment, Date of Original Filed (Month/Day/Year)	l .	dual or Joint/Group Filing (C Form filed by One Reporti Form filed by More than O	ng 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 (Ir 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V		Amount	mount (A) or (D)		(Instr. 3 and 4)		
Common Stock	11/30/2017		S		7,909	D	\$64.775	44,628	D	
Common Stock	12/01/2017		G <sup>(1)</sup>	v	233(1)	D	(2)	44,395	D	
Common Stock								1,213.197	I	401(k) plan
Common Stock								4,429.172	I	401(k) excess plan

# 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)	nstr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y	ate	Securities Underlying		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

#### Explanation of Responses:

- 1. Bona fide charitable gift by the Reporting Person.
- $2.\ Price\ is\ not\ applicable\ to\ acquisitions\ or\ dispositions\ resulting\ from\ bona\ fide\ gifts.$

# Remarks:

/s/ John G. Shively, Attorney-in-Fact for Katherine Button Bell

\*\* Signature of Reporting Person

12/04/2017

Date

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

- $^{\star}$  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.