

DAVIS CHARLES A /NJ/
Form 4
March 24, 2003

FORM 4

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

OMB APPROVAL

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number: 3235-0287
Expires: January 31, 2005
Estimated average burden
hours per response. . 0.5

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

Filed By
Romeo and Dye's
Section 16 Filer
www.section16.net

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol			6. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
DAVIS, CHARLES A.			MARSH & McLENNAN COMPANIES, INC.			☒ Director		
(Last) (First) (Middle)			3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)			10% Owner		
1166 AVENUE OF THE AMERICAS						☒ Officer (give title below)		
(Street)						Other (specify below)		
NEW YORK, NY 10036-2774			4. Statement for Month/Day/Year 03-20-2003			VICE CHAIRMAN		
(City) (State) (Zip)			5. If Amendment, Date of Original (Month/Day/Year)			7. Individual or Joint/Group Filing (Check Applicable Line)		
						☒ 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. Trans- action Date (Month/ Day/ Year)	2A. Deemed Execution Date, if any (Month/Day/ Year)	3. Trans- action Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 & 5)	5. Amount of Securities Beneficially Owned Follow- ing Reported Transactions(s) (Instr. 3 & 4)	6. Owner- ship Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
COMMON	03-20-2003		A	29,300 ⁽¹⁾	A	98,298.0274 ⁽²⁾	D	

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).

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

**FORM 4 (continued) 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. Conver- sion or Exercise Price of Derivative Security	3. Trans- action Date (Month/ Day/ Year)	3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Trans- action Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D)	6. Date Exercisable and Expiration Date (Month/Day/ Year)	7. Title and Amount of Underlying Securities (Instr. 3 & 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Owner- ship Form of Deriv- ative Security: Direct (D)
---	---	--	---	--	---	---	--	---	--	--

Edgar Filing: DAVIS CHARLES A /NJ/ - Form 4

				(Instr. 3, 4 & 5)								(Instr. 4)	or Indirect (I) (Instr. 4)
				Code	V	(A)	(D)	Date Exer-cisable	Expira- tion Date	Title	Amount or Number of Shares		
EMPLOYEE STOCK OPTION	42.99	03-20-2003		A		62,500		03-20-04	03-20-13	COMMON	62,500		D
EMPLOYEE STOCK OPTION	42.99	03-20-2003		A		62,500		03-20-05	03-20-13	COMMON	62,500		D
EMPLOYEE STOCK OPTION	42.99	03-20-2003		A		62,500		03-20-06	03-20-13	COMMON	62,500		D
EMPLOYEE STOCK OPTION	42.99	03-20-2003		A		62,500		03-20-07	03-20-13	COMMON	62,500	1,070,000	D

Explanation of Responses:

(1) Represents a Restricted Stock Award.

(2) Includes 71,900 shares of Restricted Stock.

By: /s/ **WILLIAM J. WHITE**

Attorney-in-fact

**Signature of Reporting Person

03-24-2003

Date

**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.