### Edgar Filing: SMUCKER J M CO - Form 4

SMUCKE Form 4	R J M CO										
July 26, 20	06										
FOR		STATES	SECU	DITIES		ZCII	ANCEC	OMMISSION		APPROVAL	
	UNITED	SIAIES		ashingto				UMINII5510IN	OMB Number:	3235-0287	
Check this box if no longer									Expires:	January 31, 2005	
subject to STATEMENT OF CHA Section 16. Form 4 or					N BENEI RITIES		AL OWN	ERSHIP OF	Estimated burden ho response.	average urs per	
Form 5 obligat may co <i>See</i> Ins 1(b).	ions Section 17	(a) of the l	Public I	Utility Ho	olding Co	mpai	•	e Act of 1934, 1935 or Section 0	1		
(Print or Type	e Responses)										
SMUCKER TIMOTHY P Syn			Symbol	ier Name ai CKER J N			0	5. Relationship of Reporting Person(s) to Issuer			
(Last)		of Earliest	_	-		(Check all applicable)					
				/Day/Year)	Tansaction	11		X Director 10% Owner X Officer (give title Other (specify below) below) Chairman			
								<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
ORRVILL	LE, OH 44667-028	80						Form filed by M Person			
(City)	(State)	(Zip)	Та	ble I - Non	-Derivativ	e Secu	irities Acqu	iired, Disposed of	, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	ity (Month/Day/Year) Execution Date, if			Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6.7. Nature ofOwnershipIndirectForm:BeneficialDirect (D)Ownershipor Indirect(Instr. 4)(I)(Instr. 4)		
Common				Code V	Amount	(D)	Price \$	(mour o and i)			
Shares	07/25/2006			М	12,758	А	ф 25.7248	420,622	D		
Common Shares	07/25/2006			М	12,758	А	\$ 27.2789	433,380	D		
Common Shares	07/25/2006			F	9,682	D	\$ 46.09	423,698	D		
Common Shares	07/25/2006			F	9,429	D	\$ 46.09	414,269	D		
Common Shares								5,719.588	Ι	by 401(k)	

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Common Shares	55,175	I	by Daughter
Common Shares	8,437.8357	I	by ESOP
Common Shares	65,093	I	by Wife
Common Shares	11,188	I	by Wife as Trustee
Common Shares	477,798	I	Co-Trustee FBO Self
Common Shares	477,798	I	Co-Trustee FBO Sister

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

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.

# 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. Transactic Code (Instr. 8)	orDeri Secu Acqu or D (D)	rities uired (A) isposed of r. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option Common Shares	\$ 25.7248	07/25/2006		М		12,758	<u>(1)</u>	10/28/2007	Common Shares	12,758
Option Common Shares	\$ 27.2789	07/25/2006		М		12,758	<u>(1)</u>	10/28/2007	Common Shares	12,758

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SMUCKER TIMOTHY P	Х		Chairman				

### ONE STRAWBERRY LANE ORRVILLE, OH 44667-0280

## Signatures

M. Ann Harlan, POA

07/26/2006

\*\*Signature of Reporting Person Date

**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).

(1) Employee stock option (right to buy) which becomes exercisable at the rate of 1/3 of shares per year beginning one year after grant date.

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.