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Form 4												
February 21,									OMB A	PPROVAL		
FORM	4 UNITED S	STATES					NGE	COMMISSION	OMB Number:	3235-0287		
Check this if no long subject to	or.	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF										
Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed purs s Section 17(a	SECURITIES Estimated average burden hours per response 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										
(Print or Type R	esponses)											
1. Name and Address of Reporting Person <u>*</u> COSGROVE STEPHEN J			2. Issuer Name and Ticker or Trading Symbol JOHNSON & JOHNSON [JNJ]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(Ch					(Che	k all applicable)					
JOHNSON & JOHNSON, ONE JOHNSON & JOHNSON PLAZA			(Month/Day/Year) 02/16/2007					Director10% Owner XOfficer (give titleOther (specify below)Delow) Corporate Controller				
	(Street)			ndment, Da th/Day/Year)	-			6. Individual or J Applicable Line) _X_ Form filed by	One Reporting P	erson		
NEW BRUN	ISWICK, NJ 089	33						Person	More than One R	eporting		
(City)	(State)	Zip)	Table	e I - Non-D	erivative	Securi	ities Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	d (A) of d of (D 4 and (A) or))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common	02/16/2007			А	480	А	<u>(1)</u>	66,594	D			
Common (2)								1,663	Ι	401 (k) and ESOP Savings Plans		
Common								1,438 <u>(3)</u>	Ι	By Daughter		
Common								1,438 <u>(3)</u>	Ι	By Daughter		
Common								1,438 (3)	Ι	By Son		

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
COSGROVE STEPHEN J JOHNSON & JOHNSON ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK, NJ 08933			Corporate Controller				
Signatures							
Linda E. King, Attorney-in-Fact for Stepher Cosgrove	ı J.	02/21/2007					
**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) Awarded under Issuer's Executive Bonus Plan.
- (2) Shares held under Johnson & Johnson's 401(k) and ESOP Savings Plans as of Plans' most recent reporting date (01/31/2007).
- (3) The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose. Held under UGMA.

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.