#### Edgar Filing: THERMO FISHER SCIENTIFIC INC. - Form 4

#### THERMO FISHER SCIENTIFIC INC.

Form 4

February 25, 2015

### FORM 4

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

**OMB** 3235-0287 Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires: 2005 Estimated average

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue.

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

burden hours per response... 0.5

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * HORNSTRA PETER E			Symbol	MO FISH	nd Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last) 81 WYMAN	(First) N STREET	(Middle)		Day/Year)	Fransaction	Director 10% Owner Selection Other (specify below)  VP & Chief Accounting Officer				
			endment, I onth/Day/Ye	Date Original ar)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
WALTHAM	I, MA 02451					Form filed by M Person	More than One Re	eporting		
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative Securities Acq	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of Security	2. Transaction Da (Month/Day/Yea			3. Transact	4. Securities Acquired ion(A) or Disposed of (D)	5. Amount of Securities	6. Ownership	7. Nature of Indirect		

						-	· -		Ĩ.	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securion(A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	02/23/2015		F	185	D	\$ 130.98	16,953	D		
Common Stock							533.87	I	By 401(k)	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

### Edgar Filing: THERMO FISHER SCIENTIFIC INC. - Form 4

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		4.	5.	6. Date Exer		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable Date	Title Numb of	Number			
								of			
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer Director 10% Owner Other

VP & Chief HORNSTRA PETER E 81 WYMAN STREET Accounting WALTHAM, MA 02451 Officer

### **Signatures**

/s/ Barbara J. Lucas, Attorney-in-Fact for Peter E. 02/25/2015 Hornstra

> \*\*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).

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.

Reporting Owners 2