Edgar Filing: PUBLIX SUPER MARKETS INC - Form 4

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Form 4 March 29, 2006	5									
	Л								PPROVAL	
Check this box if no longer subject to Section 16. 						OMB Number: Expires: Estimated a burden hou response	3235-0287 January 31, 2005 average rs per			
1(b). (Print or Type Resp	ponses)									
1. Name and Addr BUCCINO JO.	Symbol PUBLIX	2. Issuer Name and Ticker or Trading Symbol PUBLIX SUPER MARKETS INC [NONE]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(M			3. Date of Earliest Transaction(Month/Day/Year)03/28/2006				X_ Director 10% Owner Officer (give title Other (specify below) below)			
Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person						
LAKELAND,	FL 338020407						Form filed by M Person	Aore than One Re	porting	
(City)	(State) (Zij	p) Tabl	e I - Non-D	erivative	Securi	ties Acq	uired, Disposed of	f, or Beneficial	ly Owned	
		2A. Deemed	3. Transactic Code (Instr. 8)	4. Securi on(A) or Di (D)	ties Ad	cquired d of	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	
Common 0 Stock 0)3/28/2006		Р	500	А	\$ 80.5	2,690	D		

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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BUCCINO JOAN G							
P.O. BOX 407	Х						
LAKELAND, FL 338020407							
Signatures							
By: Robert C. Weigel (POA on file)		03/29/2006	5				

**Signature of Reporting Person

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).

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.