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| | & GAMBLE CO | | | | | | | | | | |
|--|---|--|-----------|--------------------|---|--------|---|--|--|---|--|
| Form 4 February 05 | 2007 | | | | | | | | | | |
| | | | | | | | | | OMB AF | PROVAL | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMMISSION | OMB Number: | 3235-0287 | | |
| Check th | | U | · | | | | Expires: | January 31, | | | |
| if no lon subject t Section Form 4 o | | CHANGES IN BENEFICIAL OWNE SECURITIES | | | | | Estimated average burden hours per response | | | | |
| 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 19401(b).30(h) of the Investment Company Act of 1940 | | | | | | | | | | | |
| (Print or Type | Responses) | | | | | | | | | | |
| | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) (| Middle) | 3. Date c | of Earliest T | ransaction | ı | | (Check | all applicable |) | |
| (| | | | (Month/Day/Year) | | | | XDirector10% Owner Officer (give titleOther (specify below)Other (specify | | | |
| Filed(M | | | | onth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| BEACHWO | OOD, OH 44122 | | | | | | | Person | | porting | |
| (City) | (State) | (Zip) | Tab | le I - Non- | Derivative | e Secu | rities Acqu | iired, Disposed of, | or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deem Execution any (Month/D | Date, if | Code (Instr. 8) | 4. Securi oror Dispo (Instr. 3, Amount | sed 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 Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 02/02/2007 | | | М | 4,030 | A | \$ 29.8768 | 53,019.75 | D | | |
| Common Stock | 02/02/2007 | | | F | 1,843 | D | \$ 65.365 | 5 51,176.75 <u>(1)</u> | D | | |
| Common Stock | | | | | | | | 4,238.875 | Ι | By Trust | |

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

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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) | 5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. D S (I |
|---|---|---|---|--|---|--|--------------------|---|--|--------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Stock Option (right to buy) | \$ 29.8768 | 02/02/2007 | | М | 4,030 | 02/28/1998 | 02/28/2007 | Common Stock | 4,030 | 4 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|----------|-----------|---------|-------|--|
| | | Director | 10% Owner | Officer | Other | |
| GORMAN JOSEPH T 3201 ENTERPRISE PARKWAY, SUI BEACHWOOD, OH 44122 | TE 410 | Х | | | | |
| Signatures | | | | | | |
| Adam Newton Attorney-in-Fact | 02/05/20 | 007 | | | | |
| **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) Total includes grant of dividend equivalents in the form of RSUs on Nov. 15, 2006, pursuant to Issuer's 2003 Non-Employee Directors' Stock Plan.

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.