FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

nington, D.C. 20549	
---------------------	--

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average bu	ırden									

0.5

hours per response:

Check this box if no longer subject to							
Section 16. Form 4 or Form 5							
obligations may continue. See							
Instruction 1(b).							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

			01 001	cuon so(n) or the ni	Council		party 7 tot of 15	-10						
1. Name and Address of Reporting Person*  NOSKI CHARLES H				2. Issuer Name <b>and</b> Ticker or Trading Symbol Avery Dennison Corp [ AVY ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
(Last) (First) (Middle) 207 GOODE AVENUE			3. Date 05/01/2	of Earliest Transact 2014	ion (Moi	nth/Da	y/Year)		Officer (give title below)	Other below)	(specify			
(Street) GLENDALE	CA	91203	4. If Am	4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Indiv	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City)	(State)	(Zip)												
		Table I - Noi	n-Derivative S	ative Securities Acquired, Disposed of, or Beneficially Owned										
Date			2. Transaction Date (Month/Day/Year)	Execution Date,		ction Instr.	4. Securities A Disposed Of (I			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
					Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		
Common Stock 05/0			05/01/2014		M		1,015	A	\$48.5	2,591	D			

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(org., parce, carre, marrante, optione, convertible cocarries)															
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. Transa Code ( 8)		5. Number Derivative Securities Acquired (A Disposed of (Instr. 3, 4 a	A) or of (D)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)		
2014 Director RSU Award	\$0 <sup>(1)</sup>	05/01/2014		A		2,577		05/01/2014	05/01/2017	Common Stock	2,577	\$0	2,577	D	
Common Stock Units - DDECP	\$0	05/01/2014		A		928.217 <sup>(2)</sup>		08/08/1988	08/08/1988	Common Stock	928.217	\$0	6,260.849	I	DDECP
2013 Director RSU Award	\$48.5 <sup>(3)</sup>	05/01/2014		M			1,015	05/01/2014	05/01/2016	Common Stock	1,015	\$0	2,030	D	

## **Explanation of Responses:**

- 1. The restricted stock units vest in three cumulative installments of one-third on the first, second and third anniversaries of the date of the grant.
- 2. Stock units were acquired by the reporting person pursuant to the Avery Dennison Corporation Non-Employee Director Deferred Equity Compensation Program (DDECP) in a transaction exempt under Rules 16a-11
- 3. Each restricted stock unit represents a contingent right to receive one share of Avery Dennison Corporation common stock.

/s/ Barbara M Bartoletti POA for 05/02/2014 Charles H Noski

\*\* Signature of Reporting Person

Date

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

- \* 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.

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 Number.