FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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|---|--------------------------|----------|
| | OMB Number: | 3235-028 |
| l | Estimated average burden | |

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(h) | |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* STEWART JULIA A | | | | | 2. Issuer Name and Ticker or Trading Symbol Avery Dennison Corp [AVY] | | | | | | | | | | ationship of I k all applicat | Reporting Person(s) to Issue | | n(s) to Issue | r |
|---|---|--|---|---|--|---|-------------------------|----------------|--|---------------|-------|--|-----------------------|--|---|--|--|--|--|
| | | | | | | | | | | | - | | | X | Director | | | 10% Ow | ner |
| (Last) 207 GO | (F ODE AVEN | First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 02/01/2019 | | | | | | | | | | Officer (give title below) | | Other (sp below) | | pecify | |
| (Street) GLENDALE CA 91203 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (5 | State) | (Zip) | | | | | | | | | | | | Form file | a by More | e than C | one Reportir | ng Person |
| | | T | able I - Noi | n-Deriv | ative S | Secu | ırities | Acqu | uired, | Disp | ose | d of, or | Benef | icially (| Owned | | | | |
| | | | | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Date, | Transaction Disp Code (Instr. | | | curities Acosed Of (D) | | | and 5) Securities Beneficial Owned Fo | | Form: | Direct II Indirect E tr. 4) C | . Nature of ndirect seneficial ownership |
| | | | | | | | | | Code | v | Amou | ınt (| A) or D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | nstr. 4) |
| Common Stock 02/0 | | | | | /2019 | | | M | | 5,0 | 027 | Α | \$38.18 | 15,356 | | D | | | |
| Common Stock 0 | | | | | 1/2019 | | | | S | | 5,0 | 027 D | | \$104.19 | 10,3 | 329 | | D | |
| Common Stock | | | | | | | | | | | | | | | 5,680 | | | I 7 | Trust |
| | | | Table II - | | | | | | | | | of, or B | | | wned | | | | |
| 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/Yea | Code | saction e (Instr. | of Der Sec Acq (A) Disp of (I | oosed D) tr. 3, 4 | Expira | e Exercisable : ation Date h/Day/Year) | | and | 7. Title and Amoun Securities Underlyi Derivative Security 3 and 4) | | ying | 8. Price of Derivative Security (Instr. 5) | 9. Numbo derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4) | re es ally ng d tion(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v V | (A) | (D) | Date Exerci | isable | Expir Date | ation | Title | Amou Numb Share | er of | | | | | |
| 2010 Director Stock Option | \$38.18 | 02/01/2019 | | М | | | 5,027 | 04/22/ | 2011 ⁽¹⁾ | 04/22 | /2020 | Common Stock | 5, | 027 | \$0 | 0 | | D | |
| Common Stock | \$0 | | | | | | | 08/08 | 3/1988 | 08/08 | 1988 | Common | 37,33 | 35.3034 | | 37,335.3 | 3034 | I | DDECP |

Explanation of Responses:

Units -

1. Options are exercisable in three cumulative installments of 33% each year beginning on the first anniversary date of the grant, which is the date given .

/s/ Vikas Arora POA for Julia

02/04/2019

Stewart

Stock

** 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.