FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20040

1	OMB APPROVAL									
	OMB Number:	3235-0287								
1	Estimated average by	urden								

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>Nolan Donald A</u>						2. Issuer Name and Ticker or Trading Symbol Avery Dennison Corp [AVY]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
						<u>,, c.</u> j			<u> </u>		- 1			D	recto	r		10% Ov	vner		
															Officer (give title			Other (s	specify		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								X b	below)			below)			
					08	08/26/2014								President, Materials							
207 GOODE AVENUE																					
							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)						, 5 3 ,							Lir	Line)							
GLENDALE CA 91203												X F	Form filed by One Reporting Person								
											-		F	Form filed by More than One Reporting							
(City) (State) (Zip)													Р	Person							
(City)	(3	nate)	(Ziþ)																		
		Tal	ole I - No	n-Deri	vativ	re Se	curi	ties Ac	quired	, Dis	posed o	f, or Ber	neficia	lly Ow	ned						
1. Title of Security (Instr. 3) 2. Transac					saction	ction 2A. Deemed			3.	4. Securiti	ies Acquire	es Acquired (A) or			5. Amount of		nership	7. Nature of			
j`` j				Date (Month)	Date (Month/Day/Year)		Execution Date,							4 and 5) Securitie Beneficia				orm: Direct 0) or Indirect	Indirect Beneficial		
				(MONTH)	Dayite		if any (Month/Day/Year)		Code (Instr.							ollowing			Ownership		
									· -		_	(A) or	$\overline{}$		Reported Transaction(s)			_ ` [·	(Instr. 4)		
									Code	۱v	Amount	(A) or (D)	Price			and 4)					
Common Stock 08/26/						2014 08/27/2014		М		15,000) A	\$48.)7 34,		,229		D				
Common Stock 08/26/					6/201	/2014 08/27/2014		S		15,000) D	\$48.	\$48.07 19		,229		D				
			Table II -	Deriva	ative	Sec	uritio	es Aca	uired.	Disp	osed of.	or Bene	eficially	/ Own	ed						
											convertik			,							
1. Title of	2.	3. Transaction	3A. Deeme	d (4.		5. N	umber	6. Date F	xercis	able and	7. Title an	d Amoun	t 8. Pri	e of	9. Numbe	r of	10.	11. Nature		
Derivative	Conversion	Date	Execution	Date,	Transa		ction of		Expiration Date		e of Securities		ies	Derivati		derivative	.	Ownership	of Indirect		
Security (Instr. 3)				Code (8)	ode (Instr.		Derivative Securities		ay/Yea	ar)	r) Underlying Derivative Secu			ity 5)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		Form: Direct (D)				
(msu. s)	Derivative		(MOHUI)Day	// real)	0)		Acquired (A) or		(Instr. 3 and 4)								ارد		or Indirect		
	Security																(I) (Instr. 4)				
							Disposed of (D) (Instr. 3, 4 and 5)														
													Amoun	_							
													or .								
									Date		Expiration		Number								
					Code	v	(A)	(D)	Exercisa		Date	Title	Shares								
Employee																					
Stock Option	\$31.665	08/26/2014	08/27/20	14	M			15,000	02/26/20	,, ₍₁₎ [02/26/2020	Common	 15.000) \$	1	142,62	<u>, </u>	D			
(Right to	Φ31.003	06/20/2014	00/2//20	714	IVI			13,000	02/26/20	11(-)	02/20/2020	Stock	13,000	′ *	,	142,02		ע			

Explanation of Responses:

 $1.\ Options\ are\ exercisable\ in\ four\ cumulative\ installments\ of\ 25\%\ each\ year\ beginning\ on\ the\ first\ anniversary\ date\ of\ the\ grant,\ which\ is\ the\ date\ given\ .$

/s/ Barbara Bartoletti POA for

Donald A. Nolan

08/27/2014

** 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.

 $Persons \ who \ respond \ to \ the \ collection \ of \ information \ contained \ in \ this \ form \ are \ not \ required \ to \ respond \ unless \ the \ form \ displays \ a \ currently \ valid \ OMB \ Number.$