

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* BARKER PETER K			2. Issuer Name and Ticker or Trading Symbol Avery Dennison Corp [AVY]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/01/2018			6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person Form filed by More than One Reporting Person		
207 GOODE AVENUE			4. If Amendment, Date of Original Filed (Month/Day/Year)					
(Street) GLENDAL CA 91203								
(City) (State) (Zip)								

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	05/01/2018		M		747	A	\$104.8	25,450	D	
Common Stock	05/01/2018		M		641	A	\$104.8	26,091	D	
Common Stock	05/01/2018		M		1,678	A	\$104.8	27,769	D	

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. Transaction Code (Instr. 8)		5. Number of 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 Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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				
2015 Director RSU Award	\$0	05/01/2018		M			747 ⁽¹⁾	05/01/2016	05/01/2018	Common Stock	747	\$0	0	D	
2016 Director RSU Award	\$0	05/01/2018		M			641 ⁽²⁾	05/01/2017	05/01/2019	Common Stock	641	\$0	641	D	
2017 Director RSU Award	\$0	05/01/2018		M			1,678	05/01/2018	05/01/2018	Common Stock	1,678	\$0	0	D	
2018 Director RSU Award	\$0	05/01/2018		A			1,336 ⁽³⁾	05/01/2019	05/01/2019	Common Stock	1,336	\$104.8	1,336	D	
Common Stock Units - DDECP	\$0							08/08/1988	08/08/1988	Common Stock	27,881.5		27,881.5	I	DDECP

Explanation of Responses:

- Shares reflect the vesting of the third tranche of restricted stock units granted on May 1, 2015.
- Shares reflect the vesting of the second tranche of restricted stock units granted on May 1, 2016.
- The restricted stock units vest on the first anniversary of the grant date. Each restricted stock unit represents a contingent right to receive one share of Avery Dennison Corporation common stock.

/s/ Erica Perry POA for Peter K Barker 05/02/2018

** 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.