Miller Kenneth A Form 4 April 29, 2009

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box if no longer

subject to Section 16. Form 4 or

Form 5 obligations may continue.

See Instruction

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

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 1940

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person * Miller Kenneth A

(Last)

(First)

(Middle)

ONE STRAWBERRY LANE

ORRVILLE, OH 44667-0280

(Street)

2. Issuer Name and Ticker or Trading Symbol

SMUCKER J M CO [SJM]

3. Date of Earliest Transaction (Month/Day/Year)

04/28/2009

4. If Amendment, Date Original

Filed(Month/Day/Year)

Issuer

below)

Director

Applicable Line)

X_ Officer (give title

Person

(City)	(State) ((Zip) Table	e I - Non-D	erivative :	Secur	ities Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)			
Common Shares	04/28/2009		F	394 (1)	D	\$ 37.95	5,816	D		
Common Shares	04/28/2009		F	400 (1)	D	\$ 37.95	5,416	D		
Common Shares	04/28/2009		F	543 (2)	D	\$ 37.95	4,873	D		
Common Shares	04/28/2009		F	642 (2)	D	\$ 37.95	4,231	D		
Common Shares							3,316.961	I	By 401(k)	

OMB APPROVAL

3235-0287

January 31,

2005

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Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

(Check all applicable)

Vice President

6. Individual or Joint/Group Filing(Check

X Form filed by One Reporting Person Form filed by More than One Reporting

10% Owner

_ Other (specify

Estimated average

burden hours per

Common Shares 4,994.2027 I By Esop

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

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(9-02)

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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	nt of ying ies	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Miller Kenneth A

ONE STRAWBERRY LANE Vice President ORRVILLE, OH 44667-0280

Signatures

/s/ M. Ann

Harlan, POA 04/29/2009

**Signature of Reporting 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) Smucker common shares withheld by the Company to satisfy tax liability upon the vesting of restricted common shares, pursuant to The J. M. Smucker Company 1998 Equity and Performance Incentive Plan.
- (2) Smucker common shares withheld by the Company to satisfy tax liability upon the vesting of restricted common shares, pursuant to The J. M. Smucker Company 2006 Equity Compensation Plan.

Reporting Owners 2

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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.