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SAMUELSSON BENGT
Form 4
September 20, 2002

Form 4

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FORM 4

OMB APPROVAL

OMB Number: 3235-028

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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).

(Print or Type Responses)

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of t
Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of

1. Name and Address of Reporting Person*

2. Issuer Name and Ticker

Samuelsson, Bengt

Pharmacia Corporation P

(Last)

(First)

(Middle)

3. I.R.S. Identification
Number of Reporting
Person, if an entity
(voluntary)

100 Route 206 North

(Street)

Peapack,

NJ

07977

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(City) (State) (Zip)

6. Relationship of Reporting Person(s) to Issuer
(Check all applicable)

X Director 10% Owner

Officer (give title below) Other (specify below)

7. Individual or Joint/Group Filing (Check Applicable Line)

X Form filed by One Reporting Person

Form filed by More than One Reporting Person

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) Code V	4. Security or Disposition (Instr. 4) Amount
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Common	9/18/2002		A	3,800
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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)
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8,800	D	
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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

This image shows a blank sheet of white paper with ten horizontal dashed lines, typical of primary-ruled notebook paper. The lines are evenly spaced and extend across the width of the page. There is no handwriting or other markings on the paper.

3

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(Instr. 5)

Beneficially
Owned Following
Reported
Transaction(s)
(Instr. 4)

Date Exercis- able	Expi- ration Date	Title	Amount or Number of Shares
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
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-----	-----	-----	-----
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-----	-----	-----	-----
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10. Ownership Form of Derivative Securities Beneficially Owned at End of Month (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
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Explanation of Responses:

/s/ Don W. Schmitz

**Signature of Reporting Person
Don W. Schmitz, attorney-in-fact for

9/18/02

Date

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Bengt Samuelsson

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.