FORM 4

☐ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

Triane and readess of responding reason					2. Issuer Name and Ticker or Trading Symbol BRISTOL MYERS SQUIBB CO [BMY]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
														Director	,,	10%	6 Owner		
(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)								Officer (give title below) Other (specify below) EVP, Corporate Affairs						
BRISTOL-MYERS SQUIBB					6/3/2025									, 1					
COMPANY, LINE ROAD		206 & F	PROVIN	CE															
	(Stree	et)		4. I	f An	nendme	ent, Date O	rigir	nal Fil	led (MM/	DD/	/YYYY)	6.	Individual	or Joint/G	roup Filing	(Check Appl	icable Line)	
PRINCETON, NJ 08543												_X	X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(C	ity) (Stat	te) (Zip)																
			Table I - N	Non-Der	ivat	ive Sec	urities Ac	quir	ed, D	isposed	of,	, or Be	nefic	ially Owne	ed				
1. Title of Security (Instr. 3)			2. Tr	rans. Date	ate 2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	de	4. Securities Acquir or Disposed of (D) (Instr. 3, 4 and 5)				5. Amount of Securi Following Reported (Instr. 3 and 4)		ities Beneficially Owned 1 Transaction(s)		Ownership of Be Direct (D)	7. Nature of Indirect Beneficial Ownership	
							Code	V	Amou	(A) c		Price					or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock, \$0.10 par value				3/2025	5		M		8,040	<u>(1)</u> A		\$0	8,040		D				
Common Stock, \$0.10 par value 6/3				3/2025			F		3,334	(2) D		\$48.09				4,706	D		
	Tab	le II - Der	ivative Sec	curities 1	Bene	eficially	y Owned (e.g.,	puts,	, calls, w	var	rants,	opti	ons, convei	tible secu	ırities)			
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)	Derivative Acquired Disposed		ve Securities d (A) or		6. Date Exercisable and Expiration Date		S	7. Title and A Securities Un Derivative S (Instr. 3 and		rlying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following	Form of	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Source			Code	v	(A)	(D)	Date Exer	cisable	Expiratio Date	n T	Title		Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect		
Restricted Stock Units	(3)	6/3/2025		М			8,040		(1)	6/3/2027	,	Comm Stock, \$ par val	0.10	8,040	\$0	16,080	D		

Explanation of Responses:

- (1) The restricted stock units vest in three equal annual installments beginning on June 3, 2025.
- (2) Shares withheld for payment of taxes upon vesting of awards.
- (3) Each restricted stock unit converts into one share of common stock upon vesting.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Short Bartie Wendy BRISTOL-MYERS SQUIBB COMPANY ROUTE 206 & PROVINCE LINE ROAD PRINCETON, NJ 08543			EVP, Corporate Affairs					

Signatures

/s/ Sophie M. Bail, attorney-in-fact for Wendy Short Bartie

**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 control number.