JOHNSON TINA P

Form 5

February 14, 2005

## FORM 5

#### **OMB APPROVAL**

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

OMB 3235-0362 Number: January 31, Expires:

2005

no longer subject to Section 16. Form 4 or Form 5 obligations

Check this box if

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

Estimated average burden hours per response... 1.0

may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

Reported Form 4

30(h) of the Investment Company Act of 1940

Transactions Reported

1. Name and Address of Reporting Person * JOHNSON TINA P			2. Issuer Name and Ticker or Trading Symbol PUBLIX SUPER MARKETS INC [NONE]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2004	Director 10% Owner Selective title Other (specify below) below)			
P.O. BOX 407				Senior Vice President			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Reporting			
				(check applicable line)			
LAKELAND	, FL 33	8020407		_X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person			

(City)	(State)	(Zip) Ta	ble I - Non-De	erivative Secu	rities	Acquir	ed, Disposed of	, or Beneficia	ally 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 (A) or Dispo (Instr. 3, 4 and Amount	sed of		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	03/01/2004	Â	<u>J(1)</u>	14.5631	A	\$0	212.8061	I	By 401(k)
Common Stock	08/01/2004	Â	<u>J(1)</u>	0.0031	A	\$0	212.8092	I	By 401(k)
Common Stock	08/01/2004	Â	J <u>(1)</u>	1.6369	A	\$0	214.4461	I	By 401(k)
Common Stock	03/01/2004	Â	<u>J(2)</u>	382.1386	A	\$0	9,461.8264	Ι	By ESOP

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.				•			ection of info		SEC 2270 (9-02)
Common Stock	Â	Â	Â	Â	Â	Â	18,890	I	By Spouse's Irrevocable Trust
Common Stock	Â	Â	Â	Â	Â	Â	31,838	I	By Irrevocable Trust

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

the form displays a currently valid OMB control number.

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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. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
JOHNSON TINA P P.O. BOX 407 LAKELAND, FL 338020407	Â	Â	Senior Vice President	Â		

# **Signatures**

By: Robert C. Weigel (POA on file)

\*\*Signature of Reporting Person 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) Acquired under the Publix Super Markets, Inc. 401(k) SMART Plan. Transaction exempt under rule 16b -3(c).
- (2) Acquired under the Publix Super Markets, Inc. Employee Stock Ownership Plan. Transaction exempt under rule 16b-3(c).

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure.

Reporting Owners 2

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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.