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WOOTEN JA	AMES H										
Form 4	2005										
December 20									OMB AF	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check thi if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	6. r Filed p inue.	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								January 31, Expires: 2005 Estimated average burden hours per response 0.5	
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> WOOTEN JAMES H			2. Issuer Name and Ticker or Trading Symbol ILLINOIS TOOL WORKS INC [ITW]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(3. Date of Earliest Transaction (Month/Day/Year) 12/16/2005					Director 10% Owner X Officer (give title Other (specify below) below) VP, Gen. Counsel & Secretary			
				endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting 			
								Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executio any	med n Date, if Day/Year)	Code				Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock (1) (2) (4)	12/16/2005			Code V F	Amount 690	(D) D	Price \$ 90.17	5,835	D		
Common Stock (3)	09/30/2005			А	0	A	\$ 0	1,434	I	See Footnote	

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

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number.

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. Transactio Code (Instr. 8)	5. Number of orDerivative 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (4)	\$ 54.62	12/12/1997		А	6,000	12/12/1998	12/12/2007	Common Stock	6,000
Employee Stock Option (4)	\$ 58.25	12/11/1998		А	6,000	12/11/1999	12/11/2008	Common Stock	6,000
Employee Stock Option (4)	\$ 65.5	12/17/1999		А	6,000	12/17/2000	12/17/2009	Common Stock	6,000
Employee Stock Option (4)	\$ 55.875	12/15/2000		А	15,000	12/15/2001	12/15/2010	Common Stock	15,000
Employee Stock Option (4)	\$ 62.25	12/14/2001		А	13,000	12/14/2002	12/14/2011	Common Stock	13,000
Employee Stock Option (4)	\$ 94.26	12/10/2004		А	8,000	12/10/2005	12/10/2014	Common Stock	8,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
WOOTEN JAMES H ILLINOIS TOOL WORKS INC. 3600 WEST LAKE AVENUE GLENVIEW, IL 60026			VP, Gen. Counsel & Secretary				

Signatures

/s/ James H. Wooten, Jr., V.P., Gen. Counsel & Secretary Attorney-In-Fact POA on	12/20/2005
File	12/20/2003

**Signature of Reporting Person

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) Includes shares of restricted stock vesting 12/16/2005.
- (2) Includes grant of restricted stock vesting 12/16/2005, 12/18/2006.
- (3) Includes 1,434 shares of Common Stock allocated to my account in the Illinois Tool Works Inc. Savings & Investment Plan. Information Reported as of October 26, 2005.
- (4) Options vest in four equal annual installments beginning one year from date of grant.

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.

Date