ILLINOIS TOOL WORKS INC

Form 4

November 12, 2014

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

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

January 31, Expires: 2005 Estimated average

OMB APPROVAL

Form 5 obligations may continue.

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

burden hours per response... 0.5

See Instruction 1(b).

(Print or Type Responses)

MORRISON ROBERT S Sy			2. Issuer Name and Ticker or Trading Symbol ILLINOIS TOOL WORKS INC			5. Relationship of Reporting Person(s) to Issuer		
		[ITW]				(Chec	ck all applicable	e)
(Last)	(First) (N		3. Date of Earliest Transaction (Month/Day/Year)			X Director Officer (give	titleOthe	Owner er (specify
3600 W. LA	KE AVENUE	11/07/	11/07/2014			below)	below)	
	(Street)		nendment, Date Or onth/Day/Year)	iginal		6. Individual or Jo Applicable Line) _X_ Form filed by	•	
GLENVIEV	V, IL 60026		Form filed by More than One Repor				porting	
(City)	(State)	(Zip) Tal	ole I - Non-Deriva	tive Secur	rities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Transaction(A) Code (Instr. 8)	(A) or	ed of (D)	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)
Common Stock	11/07/2014		Code V Am $A_{(1)}$ 673	ount (D)	Price \$ 92.81	90,749 (2)	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

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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. Transactic Code (Instr. 8)	5. DenNumber 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)		8
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	(3)					(3)	(3)	Common Stock	2,562	

Reporting Owners

Reporting Owner Name / Address	Relationships					
•	Director	10% Owner	Officer	Other		
MORRISON ROBERT S 3600 W. LAKE AVENUE GLENVIEW, IL 60026	X					

Signatures

Robert S. Morrison by Maria C. Green, Senior Vice President, General Counsel & Secretary, Attorney-In-Fact POA on File

11/12/2014

**Signature of Reporting Person

Date

8. Price of Derivative Security (Instr. 5)

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) Represents shares of common stock acquired pursuant to the Illinois Tool Works Inc. 2011 Long-Term Incentive Plan representing quarterly director fees.
- (2) Includes 32,478 shares of deferred stock under the ITW Directors' Deferred Fee Plan as of November 7, 2014.
- Represents units of phantom stock under the Phantom Stock Plan for non-employee directors as of November 7, 2014. Each unit is equal (3) in value to one share of common stock. The units are not transferable and have no voting rights. Additional units are credited in amounts equivalent to cash dividends paid on the common stock.

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.

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