Edgar Filing: GRIFFITH JAMES W - Form 4

GRIFFITH J	AMES W										
Form 4	_										
May 08, 201											
FORM	RITIES AND EXCHANGE COMMISS shington, D.C. 20549					OMB AF OMB Number:	PROVAL 3235-0287				
Check this box if no longer subject to Section 16. Form 4 or				GES IN I SECUR	BENEF ITIES	ICIA			Expires:January 31 2005Estimated average burden hours per response0.5		
Form 5 obligations may continue. See Instruction 1(b). 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											
(Print or Type I	Responses)										
GRIFFITH JAMES W Symbol				er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Date of (Month/D 155 HARLEM AVENUE 05/04/20			-	ansaction			X_ Director 10% Owner Officer (give title Other (specify below) below)				
				nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
GLENVIEV	V, IL 60025							Form filed by M Person			
(City)	(State)	(Zip)	Tab	le I - Non-D	erivative	Secui	rities Acqu	uired, Disposed of,	or Beneficiall	v Owned	
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)		ned 1 Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit n(A) or Di (Instr. 3,	ties A spose	cquired d of (D) 5) Price	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	
Common Stock	05/04/2018			A <u>(1)</u>	1,228	A	\$ 145.47	12,831 <u>(2)</u>	D		

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

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

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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)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative 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)		8. Price of Derivative Security (Instr. 5)
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	<u>(3)</u>				(3)	(3)	Common Stock (3)	1,148	

Reporting Owners

Reporting Owner Name / Address		Relationsh	nips				
	Director	10% Owner	Officer	Other			
GRIFFITH JAMES W 155 HARLEM AVENUE GLENVIEW, IL 60025	Х						
Signatures							
James W. Griffith, by Janet O. Love, Deputy General Counsel & Assistant Secretary, Attorney-in-Fact POA on file.							

**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) Shares of common stock acquired pursuant to the Illinois Tool Works Inc. 2015 Long Term Incentive Plan representing director's quarterly fee and an annual stock grant.
- (2) Includes 5,220 shares of deferred stock under the ITW Directors' Deferred Fee Plan as of May 4, 2018.
- Represents units of phantom stock under the Phantom Stock Plan for non-employee directors as of May 4, 2018. Each unit is equal 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.

Date