### Edgar Filing: Warren Kevin M - Form 4

Warren Kevin Form 4											
August 07, 20	)18										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMMISSION	OMB APPROVAL OMB 3235-02		
Check this			vvas	snington,	D.C. 20	J349			Number:	January 31,	
if no longe subject to Section 16 Form 4 or Form 5		SECUR	ITIES		NERSHIP OF	Expires: 200 Estimated average burden hours per response 0					
obligations may contin <i>See</i> Instruct 1(b).	s Section 17	(a) of the l	Public U		ling Co	mpan	y Act of	e Act of 1934, 1935 or Sectior 0	1		
(Print or Type Ro	esponses)										
1. Name and Address of Reporting Person <u>*</u> Warren Kevin M			2. Issuer Name <b>and</b> Ticker or Trading Symbol ILLINOIS TOOL WORKS INC					5. Relationship of Reporting Person(s) to Issuer			
		[ITW]					(Check all applicable)				
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					X_ Director 10% Owner Officer (give title Other (specify below) below)			
	RPORATION, VENUE SOUT		08/03/2	018					0010 (())		
				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			
ROCHESTE	R, NY 14604							Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	rities Acq	uired, Disposed of	or Beneficial	ly Owned	
	2. Transaction Dat (Month/Day/Year)		n Date, if	3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
~				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	08/03/2018			A <u>(1)</u>	24	А	\$ 139.55	8,295 <u>(2)</u>	D		
Common Stock								4,440	Ι	See Footnote $(3)$	

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

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# 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)	4. Transactic Code (Instr. 8)				7. Title and A Underlying S (Instr. 3 and	Securities	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>(4)</u>				(4)	<u>(4)</u>	Common Stock	1,202	

## **Reporting Owners**

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
Warren Kevin M XEROX CORPORATION 100 CLINTON AVENUE SOUTH ROCHESTER, NY 14604	Х			
Signatures				

Kevin M. Warren by Janet O. Love, Deputy General Counsel & Assistant Secretary, Attorney-in-Fact 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) Shares of common stock acquired pursuant to the Illinois Tool Works Inc. 2015 Long Term Incentive Plan representing quarterly director fees.
- (2) Includes 5,247 shares of deferred stock under the ITW Directors' Deferred Fee Plan as of August 3, 208.
- (3) Shares of common stock held in spouse's IRA.
- Represents units of phantom stock under the Phantom Stock Plan for non-employee directors as of August 3, 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.