

0049826

FORM D

Notice of Exempt Offering of Securities

U.S. Securities and Exchange Commission

Washington, DC 20549

(See instructions beginning on page 5)

OMB APPROVAL
OMB Number: 3235-0076
Expires: November 30, 2008
Estimated average burden hours per response: 4.00

Intentional misstatements or omissions of fact constitute federal criminal violations. See 18 U.S.C. 1001.

Item 1. Issuer's Identity

Name of Issuer: Illinois Tool Works Inc.

Jurisdiction of Incorporation/Organization: Delaware

Year of Incorporation/Organization (Select one)

Over Five Years Ago (selected) Within Last Five Years (specify year)

Previous Name(s)  None



Entity Type (Select one)

- Corporation
- Limited Partnership
- Limited Liability Company
- General Partnership
- Business Trust
- Other (Specify)

(If more than one issuer is filing this notice, check this box and identify additional issuer(s) by attaching Items 1 and 2 Continuation Page(s).)

Item 2. Principal Place of Business and Contact Information

Street Address 1: 3600 West Lake Avenue

Street Address 2: [Empty]

City: Glenview State/Province/Country: IL ZIP/Postal Code: 60026 Phone No.: 847-724-7500

Item 3. Related Persons

Last Name: Speer First Name: David Middle Name: B.

Street Address 1: 3600 West Lake Avenue

Street Address 2: [Empty]

City: Glenview State/Province/Country: IL ZIP/Postal Code: 60026

Relationship(s):  Executive Officer  Director  Promoter

Clarification of Response (if Necessary): [Empty]

**PROCESSED**  
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(Identify additional related persons by checking this box and attaching Item 3 Continuation Page(s).)

Item 4. Industry Group (Select one)

- Agriculture
- Banking and Financial Services
  - Commercial Banking
  - Insurance
  - Investing
  - Investment Banking
  - Pooled Investment Fund
- Business Services
- Energy
  - Electric Utilities
  - Energy Conservation
  - Coal Mining
  - Environmental Services
  - Oil & Gas
  - Other Energy
- Construction
- REITS & Finance
- Residential
- Other Real Estate
- Health Care
  - Biotechnology
  - Health Insurance
  - Hospitals & Physicians
  - Pharmaceuticals
  - Other Health Care
- Manufacturing
- Real Estate
  - Commercial
- Retailing
- Restaurants
- Technology
  - Computers
  - Telecommunications
  - Other Technology
- Travel
  - Airlines & Airports
  - Lodging & Conventions
  - Tourism & Travel Services
  - Other Travel
- Other

If selecting this industry group, also select one fund type below and answer the question below:

- Hedge Fund
  - Private Equity Fund
  - Venture Capital Fund
  - Other Investment Fund
- Is the issuer registered as an investment company under the Investment Company Act of 1940?  Yes  No

Other Banking & Financial Services

**Item 5. Issuer Size (Select one)**

Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)

- No Revenues
- \$1 - \$1,000,000
- \$1,000,001 - \$5,000,000
- \$5,000,001 - \$25,000,000
- \$25,000,001 - \$100,000,000
- Over \$100,000,000
- Decline to Disclose
- Not Applicable

OR

Aggregate Net Asset Value Range (for issuer specifying "hedge" or "other investment" fund in Item 4 above)

- No Aggregate Net Asset Value
- \$1 - \$5,000,000
- \$5,000,001 - \$25,000,000
- \$25,000,001 - \$50,000,000
- \$50,000,001 - \$100,000,000
- Over \$100,000,000
- Decline to Disclose
- Not Applicable

**Item 6. Federal Exemptions and Exclusions Claimed (Select all that apply)**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Rule 504(b)(1) (not (i), (ii) or (iii)) | Investment Company Act Section 3(c)      | <input type="checkbox"/> Section 3(c)(9)  |
| <input type="checkbox"/> Rule 504(b)(1)(i)                       | <input type="checkbox"/> Section 3(c)(1) | <input type="checkbox"/> Section 3(c)(10) |
| <input type="checkbox"/> Rule 504(b)(1)(ii)                      | <input type="checkbox"/> Section 3(c)(2) | <input type="checkbox"/> Section 3(c)(11) |
| <input type="checkbox"/> Rule 504(b)(1)(iii)                     | <input type="checkbox"/> Section 3(c)(3) | <input type="checkbox"/> Section 3(c)(12) |
| <input type="checkbox"/> Rule 505                                | <input type="checkbox"/> Section 3(c)(4) | <input type="checkbox"/> Section 3(c)(13) |
| <input checked="" type="checkbox"/> Rule 506                     | <input type="checkbox"/> Section 3(c)(5) | <input type="checkbox"/> Section 3(c)(14) |
| <input type="checkbox"/> Securities Act Section 4(6)             | <input type="checkbox"/> Section 3(c)(6) |   |
|  | <input type="checkbox"/> Section 3(c)(7) |   |

**Item 7. Type of Filing**

- New Notice      OR       Amendment

Date of First Sale in this Offering:  OR  First Sale Yet to Occur

**Item 8. Duration of Offering**

Does the issuer intend this offering to last more than one year?       Yes       No

**Item 9. Type(s) of Securities Offered (Select all that apply)**

- |  |   |
|--|---|
| <input type="checkbox"/> Equity  | <input type="checkbox"/> Pooled Investment Fund Interests |
| <input checked="" type="checkbox"/> Debt   | <input type="checkbox"/> Tenant-in-Common Securities      |
| <input type="checkbox"/> Option, Warrant or Other Right to Acquire Another Security                                  | <input type="checkbox"/> Mineral Property Securities      |
| <input type="checkbox"/> Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security | <input type="checkbox"/> Other (Describe)                 |
- 

**Item 10. Business Combination Transaction**

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer?       Yes       No

Clarification of Response (if Necessary)

Item 11. Minimum Investment

Minimum investment accepted from any outside investor \$ 250,000

Item 12. Sales Compensation

Recipient: Banc of America Securities LLC; Recipient CRD Number: 26091; No CRD Number checkbox.

(Associated) Broker or Dealer: None; (Associated) Broker or Dealer CRD Number: No CRD Number checkbox.

Street Address 1: One Bryant Park, 3rd Floor; Street Address 2: [Blank]

City: New York; State/Province/Country: NY; ZIP/Postal Code: 10036

States of Solicitation: All States checked; Grid of state checkboxes (AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY, PR).

(Identify additional person(s) being paid compensation by checking this box [ ] and attaching Item 12 Continuation Page(s).)

Item 13. Offering and Sales Amounts

(a) Total Offering Amount \$ 3,000,000,000 OR Indefinite checkbox.

(b) Total Amount Sold \$ 0

(c) Total Remaining to be Sold (Subtract (a) from (b)) \$ 3,000,000,000 OR Indefinite checkbox.

Clarification of Response (if Necessary): [Blank box]

Handwritten notes: "10/27/08", "11/27/08", "Washington, DC 20549".

Item 14. Investors

Check this box [ ] if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering: [Blank]

Enter the total number of investors who already have invested in the offering: 0

Item 15. Sales Commissions and Finders' Fees Expenses

Provide separately the amounts of sales commissions and finders' fees expenses, if any. If an amount is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$ 0 Estimate checkbox.

Finders' Fees \$ [Blank] Estimate checkbox.

Clarification of Response (if Necessary): Commercial paper program amounts outstanding and related commissions will vary.

**Item 16. Use of Proceeds**

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$ 0

Estimate

Clarification of Response (if Necessary)

[Empty box for clarification of response]

**Signature and Submission**

Please verify the information you have entered and review the Terms of Submission below before signing and submitting this notice.

**Terms of Submission.** In Submitting this notice, each identified issuer is:

Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in accordance with applicable law, the information furnished to offerees.\*

Irrevocably appointing each of the Secretary of the SEC and the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes; or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.

Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii).

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") (Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)) imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.

Each identified issuer has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person. (Check this box  and attach Signature Continuation Pages for signatures of issuers identified in Item 1 above but not represented by signer below.)

Issuer(s)

Illinois Tool Works Inc.

Name of Signer

Felix L. Rodriguez, Jr.

Signature

[Handwritten signature]

Title

Vice President & Treasurer

Number of continuation pages attached:

7

Date

11/24/2008

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 number.

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name: Hansen  
 First Name: Thomas  
 Middle Name: J.

Street Address 1: 3600 West Lake Avenue  
 Street Address 2:

City: Glenview  
 State/Province/Country: IL  
 ZIP/Postal Code: 60026

Relationship(s):  Executive Officer  Director  Promoter

Clarification of Response (if Necessary):

Last Name: Brunner  
 First Name: Robert  
 Middle Name: E.

Street Address 1: 3600 West Lake Avenue  
 Street Address 2:

City: Glenview  
 State/Province/Country: IL  
 ZIP/Postal Code: 60026

Relationship(s):  Executive Officer  Director  Promoter

Clarification of Response (if Necessary): Washington, DC

SEC  
 E. J. Processing  
 Section  
 NOV 20 2011

Last Name: Flaum  
 First Name: Russell  
 Middle Name: M.

Street Address 1: 3600 West Lake Avenue  
 Street Address 2:

City: Glenview  
 State/Province/Country: IL  
 ZIP/Postal Code: 60026

Relationship(s):  Executive Officer  Director  Promoter

Clarification of Response (if Necessary):

Last Name: Gresh, Jr.  
 First Name: Philip  
 Middle Name: M.

Street Address 1: 3600 West Lake Avenue  
 Street Address 2:

City: Glenview  
 State/Province/Country: IL  
 ZIP/Postal Code: 60026

Relationship(s):  Executive Officer  Director  Promoter

Clarification of Response (if Necessary):

(Copy and use additional copies of this page as necessary.)

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name: Hindman      First Name: Craig      Middle Name: A.

Street Address 1: 3600 West Lake Avenue      Street Address 2:

City: Glenview      State/Province/Country: IL      ZIP/Postal Code: 60026

Relationship(s):  Executive Officer     Director     Promoter

Clarification of Response (if Necessary):

Last Name: Martel      First Name: Roland      Middle Name: M.

Street Address 1: 3600 West Lake Avenue      Street Address 2:

City: Glenview      State/Province/Country: IL      ZIP/Postal Code: 60026

Relationship(s):  Executive Officer     Director     Promoter

Clarification of Response (if Necessary):

*Handwritten notes:* 10/12/2011, 10/12/2011, 10/12/2011

Last Name: Parry      First Name: David      Middle Name: C.

Street Address 1: 3600 West Lake Avenue      Street Address 2:

City: Glenview      State/Province/Country: IL      ZIP/Postal Code: 60026

Relationship(s):  Executive Officer     Director     Promoter

Clarification of Response (if Necessary):

Last Name: Santi      First Name: Ernest      Middle Name: Scott

Street Address 1: 3600 West Lake Avenue      Street Address 2:

City: Glenview      State/Province/Country: IL      ZIP/Postal Code: 60026

Relationship(s):  Executive Officer     Director     Promoter

Clarification of Response (if Necessary):

(Copy and use additional copies of this page as necessary.)

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name: Valls      First Name: Juan      Middle Name:

Street Address 1: 3600 West Lake Avenue      Street Address 2:

City: Glenview      State/Province/Country: IL      ZIP/Postal Code: 60026

Relationship(s):  Executive Officer     Director     Promoter

Clarification of Response (if Necessary):

Last Name: Warner      First Name: Jane      Middle Name: L.

Street Address 1: 3600 West Lake Avenue      Street Address 2:

City: Glenview      State/Province/Country: IL      ZIP/Postal Code: 60026

Relationship(s):  Executive Officer     Director     Promoter

Clarification of Response (if Necessary):

Last Name: Zentmyer      First Name: Hugh      Middle Name: J.

Street Address 1: 3600 West Lake Avenue      Street Address 2:

City: Glenview      State/Province/Country: IL      ZIP/Postal Code: 60026

Relationship(s):  Executive Officer     Director     Promoter

Clarification of Response (if Necessary):

Last Name: Brady      First Name: Sharon      Middle Name: M.

Street Address 1: 3600 West Lake Avenue      Street Address 2:

City: Glenview      State/Province/Country: IL      ZIP/Postal Code: 60026

Relationship(s):  Executive Officer     Director     Promoter

Clarification of Response (if Necessary):

(Copy and use additional copies of this page as necessary.)

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name: Kropp, First Name: Ronald, Middle Name: D.  
Street Address 1: 3600 West Lake Avenue, Street Address 2:  
City: Glenview, State/Province/Country: IL, ZIP/Postal Code: 60026  
Relationship(s):  Executive Officer,  Director,  Promoter  
Clarification of Response (if Necessary):

Last Name: Sutherland, First Name: Allan, Middle Name: C.  
Street Address 1: 3600 West Lake Avenue, Street Address 2:  
City: Glenview, State/Province/Country: IL, ZIP/Postal Code: 60026  
Relationship(s):  Executive Officer,  Director,  Promoter  
Clarification of Response (if Necessary):

Last Name: Wooten, Jr., First Name: James, Middle Name: H.  
Street Address 1: 3600 West Lake Avenue, Street Address 2:  
City: Glenview, State/Province/Country: IL, ZIP/Postal Code: 60026  
Relationship(s):  Executive Officer,  Director,  Promoter  
Clarification of Response (if Necessary):

Last Name: Aldinger, First Name: William, Middle Name: F.  
Street Address 1: 3600 West Lake Avenue, Street Address 2:  
City: Glenview, State/Province/Country: IL, ZIP/Postal Code: 60026  
Relationship(s):  Executive Officer,  Director,  Promoter  
Clarification of Response (if Necessary):

(Copy and use additional copies of this page as necessary.)

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name: Brailsford, First Name: Marvin, Middle Name: D.  
Street Address 1: 3600 West Lake Avenue, Street Address 2:  
City: Glenview, State/Province/Country: IL, ZIP/Postal Code: 60026  
Relationship(s):  Executive Officer  Director  Promoter  
Clarification of Response (if Necessary):

Last Name: Crown, First Name: Susan, Middle Name:  
Street Address 1: 3600 West Lake Avenue, Street Address 2:  
City: Glenview, State/Province/Country: IL, ZIP/Postal Code: 60026  
Relationship(s):  Executive Officer  Director  Promoter  
Clarification of Response (if Necessary):

Last Name: Davis, Jr., First Name: Don, Middle Name: H.  
Street Address 1: 3600 West Lake Avenue, Street Address 2:  
City: Glenview, State/Province/Country: IL, ZIP/Postal Code: 60026  
Relationship(s):  Executive Officer  Director  Promoter  
Clarification of Response (if Necessary):

Last Name: McCormack, First Name: Robert, Middle Name: C.  
Street Address 1: 3600 West Lake Avenue, Street Address 2:  
City: Glenview, State/Province/Country: IL, ZIP/Postal Code: 60026  
Relationship(s):  Executive Officer  Director  Promoter  
Clarification of Response (if Necessary):

(Copy and use additional copies of this page as necessary.)

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name: Morrison  
 First Name: Robert  
 Middle Name: S.  
 Street Address 1: 3600 West Lake Avenue  
 Street Address 2:  
 City: Glenview  
 State/Province/Country: IL  
 ZIP/Postal Code: 60026  
 Relationship(s):  Executive Officer  Director  Promoter  
 Clarification of Response (if Necessary):

Last Name: Skinner  
 First Name: James  
 Middle Name: A.  
 Street Address 1: 3600 West Lake Avenue  
 Street Address 2:  
 City: Glenview  
 State/Province/Country: IL  
 ZIP/Postal Code: 60026  
 Relationship(s):  Executive Officer  Director  Promoter  
 Clarification of Response (if Necessary):

NOV 20 2008  
 Mail Processing Section  
 Washington, DC  
 20549

Last Name: Smith  
 First Name: Harold  
 Middle Name: B.  
 Street Address 1: 3600 West Lake Avenue  
 Street Address 2:  
 City: Glenview  
 State/Province/Country: IL  
 ZIP/Postal Code: 60026  
 Relationship(s):  Executive Officer  Director  Promoter  
 Clarification of Response (if Necessary):

Last Name: Strobel  
 First Name: Pamela  
 Middle Name: B.  
 Street Address 1: 3600 West Lake Avenue  
 Street Address 2:  
 City: Glenview  
 State/Province/Country: IL  
 ZIP/Postal Code: 60026  
 Relationship(s):  Executive Officer  Director  Promoter  
 Clarification of Response (if Necessary):

(Copy and use additional copies of this page as necessary.)

Item 12 Continuation Page

Item 12. Sales Compensation (Continued)

Recipient

J. P. Morgan Securities Inc.

(Associated) Broker or Dealer  None

Street Address 1

270 Park Avenue, 8th Floor

City  
New York

State/Province/Country  
NY

ZIP/Postal Code  
10017

Recipient CRD Number

79

No CRD Number

(Associated) Broker or Dealer CRD Number

No CRD Number

Street Address 2

States of Solicitation  All States

- AL  AK  AZ  AR  CA  CO  CT  DE  DC  FL  GA  HI  ID
- IL  IN  IA  KS  KY  LA  ME  MD  MA  MI  MN  MS  MO
- MT  NE  NV  NH  NJ  NM  NY  NC  ND  OH  OK  OR  PA
- RI  SC  SD  TN  TX  UT  VT  VA  WA  WV  WI  WY  PR

Recipient

(Associated) Broker or Dealer  None

Street Address 1

City

Recipient CRD Number

No CRD Number

(Associated) Broker or Dealer CRD Number

No CRD Number

Street Address 2

State/Province/Country

ZIP/Postal Code

States of Solicitation  All States

- AL  AK  AZ  AR  CA  CO  CT  DE  DC  FL  GA  HI  ID
- IL  IN  IA  KS  KY  LA  ME  MD  MA  MI  MN  MS  MO
- MT  NE  NV  NH  NJ  NM  NY  NC  ND  OH  OK  OR  PA
- RI  SC  SD  TN  TX  UT  VT  VA  WA  WV  WI  WY  PR

END