

Clerk of the House of Representatives  
 Legislative Resource Center  
 B-106 Cannon Building  
 Washington, DC 20515

Secretary of the Senate  
 Office of Public Records  
 232 Hart Building  
 Washington, DC 20510

SECRETARY OF THE SENATE  
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**LOBBYING REPORT**

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

|  |  |                           |                |
|--|--|---------------------------|----------------|
| 1. Registrant Name<br>Illinois Tool Works Inc.   |  |                           |                |
| 2. Address <input type="checkbox"/> Check if different than previously reported<br>3600 West Lake Avenue         |  |                           |                |
| 3. Principal Place of Business (if different from line 2)<br>City: Glenview State/Zip (or Country) IL 60025-5811 |  |                           |                |
| 4. Contact Name<br>Michael J. Lynch  |  | Telephone<br>847/657-4232 | 5. Senate ID # |
| 7. Client Name <input checked="" type="checkbox"/> Self  |  | 6. House ID #<br>34532000 |                |

8. Year 2000 Midyear (January 1-June 30)  OR Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report  Termination Date: \_\_\_\_\_ 11. No Lobbying Activity

**INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

|  |   |
|--|---|
| <p><b>12. Lobbying Firms</b></p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____<br/> <small>Income (nearest \$20,000)</small></p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p> | <p><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>30,000</u><br/> <small>Expenses (nearest \$10,000)</small></p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p> |
|--|---|

Signature: Michael J. Lynch

Printed Name and Title: Michael J. Lynch Director, Public Affairs

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Registrant Name Illinois Tool Works Client Name \_\_\_\_\_

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

15. General issue area code MAN (one per page)

16. Specific lobbying issues

Support for Dumping Matters

17. House(s) of Congress and Federal agencies contacted  Check if None

US House  
US Department of Congress

18. Name of each individual who acted as a lobbyist in this issue area

| Name             | Covered Official Position (if applicable) | New                      |
|------------------|---|--------------------------|
| Michael J. Lynch |   | <input type="checkbox"/> |
| Laurin Baker     |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |

19. Interest of each foreign entity in the specific issues listed on line 16 above  Check if None

Signature Michael Lynch Date 8/10/00  
Printed Name and Title Michael J. Lynch Director, Public Affairs

Registrant Name Illinois Tool Works Inc Client Name \_\_\_\_\_

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

15. General issue area code ART (one per page)

16. Specific lobbying issues

Appropriations for the Chicago Museum of Science and Industry

17. House(s) of Congress and Federal agencies contacted

Check if None

US House

US Senate

18. Name of each individual who acted as a lobbyist in this issue area

| Name             | Covered Official Position (if applicable) | New                      |
|------------------|---|--------------------------|
| Michael J. Lynch |   | <input type="checkbox"/> |
| Laurin Baker     |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |
|                  |   | <input type="checkbox"/> |

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature

*Michael J. Lynch*

Date

8/14/00

Printed Name and Title

Michael J. Lynch

Director, Public Affairs

Form LD-2 (Rev. 5/98)

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Registrant Name Illinois Tool Works Inc Client Name \_\_\_\_\_

**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address \_\_\_\_\_

21. Client new principal place of business (if different from line 20)

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

22. New general description of client's business or activities \_\_\_\_\_

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client \_\_\_\_\_

**ISSUE UPDATE**

24. General lobbying issues previously reported that no longer pertain \_\_\_\_\_

HCR

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

| Name | Address | Principal Place of Business<br>(city and state or country) |
|------|---------|--|
|      |         |  |

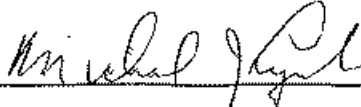
26. Name of each previously reported organization that is no longer affiliated with the registrant or client \_\_\_\_\_

**FOREIGN ENTITIES**

27. Add the following foreign entities

| Name | Address | Principal place of business<br>(city and state or country) | Amount of contribution<br>for lobbying activities | Owship<br>percentage in<br>client |
|------|---------|--|---|-----------------------------------|
|      |         |  |   |                                   |

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant, client or affiliated organization \_\_\_\_\_

Signature  Date 8/10/00  
Printed Name and Title Michael J. Lynch Director, Public Affairs