Edgar Filing: SOODIK BONNIE W - Form 4

SOODIK B	ONNIE W									
Form 4										
October 24	, 2005									
FORM					GE COMMISSION	OMB A	PPROVAL			
	OMB Number:	3235-0287								
Check this box							January 31,			
if no lo subject		MENT OF CHA	ANGES IN B	ENEFICIAI	L OWNERSHIP OF	Expires: Estimated	2005 average			
-	Section 16. SECURITIES						urs per			
Form 4						response	. 0.5			
Form 5 obligati	000				change Act of 1934,					
may con			-		Act of 1935 or Section	n				
See Inst	ruction	30(h) of the	Investment C	company Act	of 1940					
1(b).										
(Print or Type	Responses)									
1. Name and	Reporting Person(s) to									
SOODIK I	BONNIE W	Symbo			Issuer					
		BOE	ING CO [BA]]	(Chec	k all applicabl	e)			
(Last)	(First) (Middle) 3. Dat	e of Earliest Tran	isaction	(- ,			
			h/Day/Year)		Director		% Owner			
100 N. RIVERSIDE PLAZA, M/C 10/20/2)/2005		X Officer (give below)	XOfficer (give titleOther (specify below) below)				
5003-1001					Sr. V.P., 1	nternal Gover	nance			
(Street) 4. If			mendment, Date	Original	6. Individual or Jo	6. Individual or Joint/Group Filing(Check				
		Filed(Month/Day/Year)		Applicable Line)					
arra					_X_ Form filed by C Form filed by M					
CHICAGO	D, IL 60606				Person		epotting			
(City)	(State)	(Zip) T	able I - Non-Der	rivative Securit	ies Acquired, Disposed of	, or Beneficia	lly Owned			
1.Title of	2. Transaction Date		•••	. Securities		. Ownership	7. Nature of			
Security (Instr. 3)	(Month/Day/Year)	Execution Date, in		cquired (A) or bisposed of (D)		orm: Direct D) or Indirect	Indirect Papaficial			
(IIIsu. 5)		any (Month/Day/Year		instr. 3, 4 and 5)	Owned (1	· ·	Ownership			
		× 2		, ,	Following (1	Instr. 4)	(Instr. 4)			
				(A)	Reported					
				or	Transaction(s) (Instr. 3 and 4)					
			Code V A	mount (D) H	Price					
Reminder: Re	port on a separate line	e for each class of s	ecurities benefici	ially owned dire	ctly or indirectly.					
				-	o respond to the collec	tion of S	SEC 1474			
					contained in this form		(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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	Ε
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	S

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8		Securit Acquire (A) or Dispose of (D) (Instr. 3 and 5)	ed ed				C
				Code Y	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Deferred Compensation Units	<u>(1)</u>	10/20/2005		А		9.04 (2)		<u>(3)</u>	(3)	Common	9.04 \$
Deferred Compensation Units	<u>(1)</u>	10/20/2005		Α		2.26 (4)		(3)	(3)	Common	2.26

Reporting Owners

Reporting Owner Name / Address	s Relationships						
	Director	10% Owner	Officer	Other			
SOODIK BONNIE W 100 N. RIVERSIDE PLAZA M/C 5003-1001 CHICAGO, IL 60606			Sr. V.P., Internal Governance				
Signatures							
By: /s/ Mark R. Pacioni as Attorney-in-Fact		10/	21/2005				
**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) Phantom stock units are convertible into common stock on a 1-for-1 basis.
- (2) Phantom stock units acquired under the Company's Deferred Compensation Plan through salary deferral.
- Phantom stock units acquired by reporting person pursuant to the Company's Deferred Compensation Plan. Units are payable in stock or(3) cash following termination for retirement, death, disability or layoff. Company match contributions are forfeited upon termination for any reason other than retirement, death, disability or layoff.
- (4) Company match of phantom stock units allocated to the reporting person's account under the Company's Deferred Compensation Plan.

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.