Edgar Filing: MACIER ROBERT R - Form 4

MACIER RC	OBERT R										
Form 4											
February 02,	2005										
FORM	14								PPROVAL		
	• UNITED) STATE:		ITIES Al hington, 1			COMMISSION	OMB Number:	3235-0287		
Check thi if no long	or							Expires:	January 31, 2005		
subject to		MENT O	F CHAN	GES IN BENEFICIAL OWNERSHIP OF				Estimated	Estimated average		
Section 16.			SECURITIES				burden hours per				
Form 4 or Form 5		rement to	Section 16	S(a) of the	Soouriti	oc Evolon	a_2 A at of 1024	response	response 0.5		
obligatior	¹⁸ Section 17						ge Act of 1934, of 1935 or Sectio	'n			
may conti	inue.	· /		•	U	y Act of 19		11			
See Instru 1(b).	iction	50(11)) of the m	vestment	company	<i>y</i> 1 ict of 1 <i>y</i>	10				
-(-).											
(Print or Type R	Responses)										
		- *									
MACIER ROBERT R Symbol			er Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer					
			-			TI	100401				
	CA			PILLAR	_	.1]	(Check all applicable)				
(Last)	(First)	(Middle)		Earliest Tra	ansaction			100			
HARBOR	DR. A-1, P. O. B	OX	(Month/D) 01/31/20	•			Director X_ Officer (give		6 Owner er (specify		
85376	ж. <i>н</i> -1, 1 . О. Б		01/31/20	105			below)	below)			
00070							V	ice President			
			Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
			Filed(Mon	th/Day/Year)			Applicable Line) _X_ Form filed by	One Reporting P	erson		
SAN DIEGO	D, CA 92186-53	76					Form filed by M	More than One R			
	<i>o</i> ,						Person				
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securities Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction Da	ate 2A. De	emed	3.	4. Securi	ties	5. Amount of	6. Ownership	7. Nature of		
Security	any		on Date, if	TransactionAcquired (A) or		Beneficially	Form: Direct (D) or Indirect (I)	Indirect			
(Instr. 3)			/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				Beneficial Ownership			
		(WOIIIII	/Day/Teal)	(111501.0)	(111501. 5,	4 and <i>5</i>)	Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						or	Transaction(s) (Instr. 3 and 4)				
~				Code V	Amount	(D) Price	`````				
Common							26,992 <u>(1)</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)

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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)	: 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. 6. Date Exercises ionNumber Expiration Date of (Month/Day/Ye Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	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	\$ 0 <u>(2)</u>	01/31/2005		А	25	(3)	(3)	Common	25	\$ 0

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
MACIER ROBERT R HARBOR DR. A-1 P. O. BOX 85376 SAN DIEGO, CA 92186-5376			Vice President				
Signatures							
R. R. Macier; L.J. Huxtable, POA	()2/02/2005					
<u>**Signature of Reporting Person</u>		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) This amount includes 5621 shares in 401K and 753 shares in dividend reinvestment.
- (2) Security converts to common stock on a one-for-one basis.
- (3) The reported phantom stock units were acquired under Caterpillar Inc.'s deferred employee investment plan and will be settled upon the reporting person's retirement or other termination of service.

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.