Section 1: SC 13G (13G)

Schedule 13G

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SCHEDULE 13G

Under the Securities Exchange Act of 1934

(Amendment No. ____)*

	ILLINOIS TOOL WORKS INC.
	(Name of Issuer)
	COMMON SHARES
	(Title of Class of Securities)
	452308109
	(Cusip Number) 12/31/2018
 (Date	of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

[X] Rule 13d-1(b)

[] Rule 13d-1(c)

[] Rule 13d-1(d)

*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class

of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page. The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes). Page ____ of ___ Pages 2 11 Schedule 13G CUSIP No. ____452308109 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Mutual Automobile Insurance Company 37-0533100 2. Check the appropriate box if a Member of a Group (b) __X__ 3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois Number of 5. Sole Voting Power: 16,563,200 Shares Beneficially 6. Shared Voting Power: 80,695 Owned by 7. Sole Dispositive Power: 16,563,200 Each Reporting Person With 8. Shared Dispositive Power: 80,695 9. Aggregate Amount Beneficially Owned by each Reporting Person: 16,643,895 10. Check Box if the Aggregate Amount in Row 9 excludes Certain Shares: 11. Percent of Class Represented by Amount in Row 9: 5.07 % 12. Type of Reporting Person: IC Page ____ of ___ Pages ____ 11 Schedule 13G CUSIP No. ___452308109 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Life Insurance Company 37-0533090 2. Check the appropriate box if a Member of a Group (a) _____ (b) __X__ 3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois Number of 5. Sole Voting Power: 348,600 Shares Beneficially 6. Shared Voting Power: 18,256

7. Sole Dispositive Power: 348,600

Person With 8. Shared Dispositive Power: 18,256

Owned by Each

Reporting

^{9.} Aggregate Amount Beneficially Owned by each Reporting Person: 366,856

10.	Check Box	x if the Aggregate Amount in Row 9 ex	xcludes Certain Shares:
11.	Percent o	of Class Represented by Amount in Ro	w 9: 0.11 %
12.	Type of I	Reporting Person: IC	
Sch	nedule 13G		Page of Pages 4 11
CUSI	IP No	452308109	
1.		Reporting Person and I.R.S. Identificant Fire and Casualty Company 37-0533	
2.	Check the (a)X		roup
3.	SEC USE (ONLY:	
4.	Citizens	hip or Place of Organization: Illino	is
	mber of ares	5. Sole Voting Power: 2,600,000	
Ber		6. Shared Voting Power: 10,736	
Eac	-	7. Sole Dispositive Power: 2,600,0	00
_	son With	8. Shared Dispositive Power: 10,73	6
9.	Aggregate	e Amount Beneficially Owned by each	— Reporting Person: 2,610,736
LO.		x if the Aggregate Amount in Row 9 e	
1.		of Class Represented by Amount in Ro	w 9: 0.79 % —
.2.		Reporting Person: IC	
Sch	nedule 13G		Page of Pages 5 11
USI!	IP No	452308109	
1.		Reporting Person and I.R.S. Identification of the Reporting Person of the Report Person and I.R.S. Identification of the Report Person of the	cation No.:
2.	Check the (a)X		roup
3.	SEC USE (ONLY:	
4.	Citizensl	hip or Place of Organization: Delawa	 re
	mber of ares	5. Sole Voting Power: 783,100	
Ber		6. Shared Voting Power: 0	
Eac	-	7. Sole Dispositive Power: 783,100	
_	rson With	8. Shared Dispositive Power: 0	
9.	Aggregate	e Amount Beneficially Owned by each	— Reporting Person: 783.100

11. Percent of Class Represented by Amount in Row 9: 0.24 %
12. Type of Reporting Person: IA
Schedule 13G Page of Page 6 11
CUSIP No452308109
1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Employee Retirement Trust 36-6042145
2. Check the appropriate box if a Member of a Group (a) (b)X
3. SEC USE ONLY:
4. Citizenship or Place of Organization: Illinois
Number of 5. Sole Voting Power: 1,518,100 Shares
Beneficially 6. Shared Voting Power: 12,269 Owned by
Each 7. Sole Dispositive Power: 1,518,100
ReportingPerson With 8. Shared Dispositive Power: 12,269
9. Aggregate Amount Beneficially Owned by each Reporting Person: 1,530,3
11. Percent of Class Represented by Amount in Row 9: 0.47 %
11. Percent of Class Represented by Amount in Row 9: 0.47 %
11. Percent of Class Represented by Amount in Row 9: 0.47 %
11. Percent of Class Represented by Amount in Row 9: 0.47 % 12. Type of Reporting Person: EP Schedule 13G Page of Page 7 11
11. Percent of Class Represented by Amount in Row 9: 0.47 % 12. Type of Reporting Person: EP Schedule 13G Page of Page 7 11
11. Percent of Class Represented by Amount in Row 9: 0.47 % 12. Type of Reporting Person: EP Schedule 13G Page of Page 7
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11. Percent of Class Represented by Amount in Row 9: 0.47 % 12. Type of Reporting Person: EP Schedule 13G Page of Page 7
11. Percent of Class Represented by Amount in Row 9: 0.47 % 12. Type of Reporting Person: EP Schedule 13G Page of Page 7 11 CUSIP No452308109 1. Name of Reporting Person and I.R.S. Identification No.: State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees 37-6091823 2. Check the appropriate box if a Member of a Group (a) (b)X 3. SEC USE ONLY: 4. Citizenship or Place of Organization: Illinois
11. Percent of Class Represented by Amount in Row 9: 0.47 % 12. Type of Reporting Person: EP Schedule 13G Page of Page 7
11. Percent of Class Represented by Amount in Row 9: 0.47 % 12. Type of Reporting Person: EP Schedule 13G Page of Page 7

^{9.} Aggregate Amount Beneficially Owned by each Reporting Person: 1,341,700

10.	Chec	k Box if the Aggregate Amount in Row 9 excludes Certain Shares:
11.	Perd	ent of Class Represented by Amount in Row 9: 0.41 %
12.	Туре	e of Reporting Person: EP
Sch	edule	Page of Pages 8 11
Item	1(a)	and (b). Name and Address of Issuer & Principal Executive Offices: ILLINOIS TOOL WORKS INC. 155 HARLEM AVE. GLENVIEW, ILL 60025
Item	2(a)	. Name of Person Filing: State Farm Mutual Automobile Insurance
		Company and related entities; See Item 8 and Exhibit A
Item	2(b)	. Address of Principal Business Office: One State Farm Plaza
		Bloomington, IL 61710
Item	2(c)	. Citizenship: United States
Item	2(d)	and (e). Title of Class of Securities and Cusip Number: See above.
Item	3.	This Schedule is being filed, in accordance with 240.13d-1(b).
		See Exhibit A attached.
Item	4(a)	. Amount Beneficially Owned: 23,276,656 shares
Item	4(b)	. Percent of Class: 7.09 percent pursuant to Rule 13d-3(d)(1).
Item	4(c)	. Number of shares as to which such person has:
		(i) Sole Power to vote or to direct the vote: 23,154,700 (ii) Shared power to vote or to direct the vote: 121,956 (iii) Sole Power to dispose or to direct disposition of: 23,154,700 (iv) Shared Power to dispose or to direct disposition of: 121,956
Item	5.	Ownership of Five Percent or less of a Class: Not Applicable.
Item	6.	Ownership of More than Five Percent on Behalf of Another Person: N/A
Item	7.	Identification and Classification of the Subsidiary Which Acquired
		the Security being Reported on by the Parent Holding Company: N/A
Item	8.	Identification and Classification of Members of the Group:
		See Exhibit A attached.

chedule 13G	Page of Pages 9 11			
Item 10. Certification. By signing my knowledge and belief, the securit acquired in the ordinary course of b for the purpose of and do not have t influencing the control of the issue not acquired in connection with or a transaction having such purpose or e	usiness and were not acquired he effect of changing or r of such securities and were s a participant in any			
After reasonable inquiry and to the I certify that the information set f complete and correct.				
01/31/2019	STATE FARM MUTUAL AUTOMOBILE			
 Date	INSURANCE COMPANY			
	STATE FARM LIFE INSURANCE COMPANY			
	STATE FARM FIRE AND CASUALTY COMPANY			
STATE FARM INSURANCE COMPANIES EMPLOYEE RETIREMENT TRUST	STATE FARM INVESTMENT MANAGEMENT CORP.			
STATE FARM INSURANCE COMPANIES SAVINGS AND THRIFT PLAN FOR U.S. EMPLOYEES	STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM GROWTH FUND			
	STATE FARM ASSOCIATES FUNDS TRUST - STATE FARM BALANCED FUND			
/s/ Paul N. Eckley	/s/ Paul N. Eckley			
Paul N. Eckley, Fiduciary of each of the above chedule 13G	Paul N. Eckley, Vice President of each of the above Page of Page			
EXHIBIT A	10 11			

constitute a "group" with regard to the ownership of shares reported herein.

Auto Company, an Illinois-domiciled insurance company, is the parent company of multiple wholly owned insurance company subsidiaries,

including State Farm Life Insurance Company, and State Farm Fire and Casualty Company. Auto Company is also the parent company of State Farm Investment Management Corp.. ("SFIMC"), which is a registered transfer agent under the Securities Exchange Act of 1934 and a registered investment advisor under the Invest Advisors Act of 1940. SFIMC serves as transfer agent and investment advisor to State Farm Associates' Fund Trust, a Delaware Business Trust that is a registered investment company under the Investment Company Act of 1940. Auto Company also sponsors two qualified retirement plans for the benefit of its employees, which plans are named the State Farm Insurance Companies Employee Retirement Trust and State Farm Insurance Companies Savings and Thrift Plan for U.S. Employees (collectively the "Qualified Plans").

As part of its corporate structure, Auto Company has established an Investment Department. The Investment Department is directly or indirectly responsible for managing or overseeing the management of the investment and reinvestment of assets owned by each person that has joined in filing this Schedule 13G. Moreover, the Investment Department is responsible for voting proxies or overseeing the voting of proxies related to issuers the shares of which are held by one or more entities that have joined in the filing of this report. Each insurance company included in in this report and SFIMC have established an Investment Committee that oversees the activities of the Investment Department in managing the firm's assets. The Trustees of the Qualified Plans perform a similar role in overseeing the investment of each plan's assets.

Pursuant to Rule 13d-4 each person listed in the table below expressly disclaims "beneficial ownership" as to all shares as to which such person has no right to receive the proceeds of sale of the security and disclaims that it is part of a "group".

			Number hares l	~ =
	Classificati	on o	n Proc	eeds
Name	Under Item	3	of Sa	le
State Farm Mutual Automobile Insurance Compa	ny IC	16,6	43,895	shares
State Farm Life Insurance Company	IC	3	66,856	shares
State Farm Fire and Casualty Company	IC	2,6	10,736	shares
State Farm Investment Management Corp.	IA		0	shares
State Farm Associates Funds Trust - State				
Farm Growth Fund	IV	6	52,500	shares
State Farm Associates Funds Trust - State				
Farm Balanced Fund	IV	1	30,600	shares
STATE FARM INTERNATIONAL LIFE, LLC	IV		0	shares
State Farm Insurance Companies Employee				
Retirement Trust	EP	1,5	30,369	shares
State Farm Insurance Companies Savings and				
Thrift Plan for U.S. Employees	EP			
Equities Account		9	44,600	shares
Balanced Account		3	97,100	shares
State Farm Mutual Fund Trust	IV		0	shares
				_

23,276,656 shares

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