## Edgar Filing: WALTON WILLIAM L - Form 4

WALTON WILLIAM L								
Form 4								
June 23, 2005								
FORM 4 UNITED			CHANGE		r	PPROVAL		
UNITED		RITIES AND EX ashington, D.C. 20		COMMISSION	OMB Number:	3235-0287		
Check this box					Expires:	January 31, 2005		
subject to STATEN	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							
Section 16.		SECURITIES	Estimated average burden hours per					
Form 4 or Form 5 Filed put	~ .				response	. 0.5		
abligations Theu put		16(a) of the Securi		0				
may continue.		Utility Holding Cor	· ·		n			
See Instruction	30(n) of the l	Investment Compar	ny Act of 1	940				
1(b).								
(Print or Type Responses)								
1. Name and Address of Reporting	Person <u>*</u> 2. Issu	er Name and Ticker or	Trading	5. Relationship of	f Reporting Per	rson(s) to		
WALTON WILLIAM L	Symbol		Issuer					
	ALLI	ED CAPITAL COF	(Check all applicable)					
(Last) (First) (	Middle) 3. Date	of Earliest Transaction	(Cnec	ск ан аррисабі	e)			
	/Day/Year)	X Director	109	% Owner				
1919 PENNSYLVANIA AV	/ENUE, 06/22/	2005	XOfficer (give	e title Oth below)	er (specify			
NW, 3RD FLOOR				below) Cha	airman & CEO			
(Street)	4 If An	nendment, Date Origina	al	6. Individual or Jo	oint/Group Fili	ng(Check		
		onth/Day/Year)		Applicable Line)				
_X_ Form filed by One Reporting Person								
WASHINGTON, DC 20006				Form filed by M Person	More than One R	eporting		
(City) (State)	(Zip) Ta		~					
(enty) (state)	(Zip) Ta	ble I - Non-Derivative	Securities A	cquired, Disposed o	f, or Beneficia	lly Owned		
1.Title of 2. Transaction Date		3. 4. Securit			6. Ownership	7. Nature of		
Security (Month/Day/Year) (Instr. 3)	Execution Date, if any	TransactionAcquired Code Disposed			Form: Direct D) or Indirect	Indirect Beneficial		
(Inst. 5)		(Instr. 8) (Instr. 3,		•	I)	Ownership		
	· · · ·			Following (	Instr. 4)	(Instr. 4)		
			(A)	Reported				
			or	Transaction(s) (Instr. 3 and 4)				
		Code V Amount	(D) Price	(				
Reminder: Report on a separate line	e for each class of se	curities beneficially ow	ned directly o	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)

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

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired or Dispose (D) (Instr. 3, 4 and 5)	ed of					(Inst
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	<u>(1)</u>	06/22/2005		А		13,132		(2)	(3)	Common Stock	13,132	27.

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>			Re	lationships	
		Director	10% Owner	Officer	Other
WALTON WILLIAM L 1919 PENNSYLVANIA AVENUE, NW 3RD FLOOR WASHINGTON, DC 20006		Х		Chairman & CEO	
Signatures					
s/ William L.					
Walton	06/23/2005				
<u>**</u> Signature of	Date				

<u>\*\*</u>Signature of Reporting Person

## **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 acquired have a 1 for 1 conversion.
- (2) The phantom stock units were awarded under the Allied Capital Corporation Deferred Compensation Plan II and are fully vested.
- (3) Upon termination, phantom stock units will be distributed over a two year period or immediately upon a change in control.
- (4) Securities adjusted for Non-Reportable Transactions.

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.