### Edgar Filing: GALLAGHER ARTHUR J & CO - Form 4

GALLAGHE Form 4 April 04, 2005	R ARTHUR J & C 5	20									
FORM	Л							OMB AF	PROVAL		
	UNITED SI	FATES SECUR Was	ITIES AN hington, I			IGE C	OMMISSION	OMB Number:	3235-0287		
Check this if no longe subject to Section 16	sr STATEME	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									
Form 4 or Form 5 obligations may contir <i>See</i> Instruc 1(b).	Section 17(a)	ant to Section 16 of the Public Uti 30(h) of the Inv	ility Holdi	ng Com	bany	Act of	1935 or Section	response	0.5		
(Print or Type Re	esponses)										
1. Name and Ad GALLAGHE	Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer					
		GALLA [AJG]	GALLAGHER ARTHUR J & CO [AJG]					(Check all applicable)			
(Last) ARTHUR J.	(Month/Da	3. Date of Earliest Transaction (Month/Day/Year) 04/01/2005				X Director X Officer (give below)		Owner er (specify			
ITASCA, IL	(Street) 60143		adment, Date h/Day/Year)	e Original			6. Individual or Jo Applicable Line) _X_ Form filed by M Person	One Reporting Pe	rson		
(City)	(State) (Zi	<sup>ip)</sup> Table	e I - Non-De	rivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		(Instr. 8)	on(A) or D (D)	4 and (A) or	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	04/01/2005		F <u>(1)</u>	2,805	D	\$ 28.8	724,469	D			
Common Stock							400,000	Ι	by Trust		
Common Stock							300,000	I	by Trust 2 $(3)$		
Common Stock							276,048	Ι	by Trust 3 $(4)$		
Common Stock							400,000	Ι	by Trust 4 $(5)$		

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Common Stock	500,000	Ι	by Trust 5 $(6)$
Common Stock (restricted)	8,333	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed		ate	7. Title Amoun Underly Securiti (Instr. 3	nt of ying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans
				of (D) (Instr. 3, 4, and 5)						(Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title M	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
GALLAGHER ROBERT E ARTHUR J. GALLAGHER & CO. TWO PIERCE PLACE ITASCA, IL 60143	Х		Chairman				
Signatures							
By: John C. Rosengren For: Robert I Gallagher	Ξ.	04/04	4/2005				
<b>**</b> Signature of Reporting Person		I	Date				
Evalenation of Doon	-						

### **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).

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- (1) Shares withheld to cover applicable taxes on restricted stock distribution.
- (2) Held in irrevocable trust by three trustees for the benefit of spouse.
- (3) Held in trust for benefit of grandchildren.
- (4) Held in trust for benefit of daughter.
- (5) Held in irrevocable charitable trust.

Securities are held of record by Flagship Limited Partnership, an Illinois limited partnership ("Flagship"). The reporting person is the
 (6) general partner of Flagship and, as such, may be deemed to be beneficial owner of such shares. The reporting person disclaims beneficial ownership of these securities except to the extent of his pecuniary interest therein.

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.