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MASCO C	ORP /DE/										
Form 4											
May 12, 20	005										
FOR	\mathbf{M} 4 UNITED		SECU			CILANC		NT.	PPROVAL		
	UNITED	SIAIES		shington			E COMMISSIO	N OMB Number:	3235-0287		
	this box										
	if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								2005 average		
Section			burden hou	burden hours per							
Form 4 Form 5		repart to S	Section	16(a) of th	ne Securi	ties Exch	ange Act of 1934,	response	. 0.5		
obligati	ions Section 17						t of 1935 or Secti				
may co	truction			nvestmen	•	• •		.011			
1(b).	uueuon	. ,			1	2					
(Print or Type	e Responses)										
1 Name and	Address of Reporting	Person *	2 Lague	Nome on	d Tielsen er	Tending	5 Relationshin	of Reporting Per	rson(s) to		
1. Name and Address of Reporting Person <u>*</u> ISTOCK VERNE G			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer				
			MASCO CORP /DE/ [MAS]								
(Last)	(First)	(Middle)		of Earliest T	-	-	(Check all applicable)				
			(Month/Day/Year)				_X_ Director 10% Owner				
MAIL CODE IL 1-0554, 1 BANK			05/10/2005			Officer (give title Other (specify below)					
ONE PLA	ZA						below)	Delow)			
			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mo	onth/Day/Yea	r)		Applicable Line)				
CITICACO			y One Reporting Person More than One Reporting								
CHICAG	D, IL 60670-0554						Person				
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	e 2A. Deemo	ed	3.	4. Securit	ties	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution	Date, if	TransactionAcquired (A) or			Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/Da	av/Year)	Code (Instr. 8)	Disposed (Instr. 3, 4		Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(1.101111.20	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(mour o)	(1115411-0),	· und c)	Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Price	e				
Reminder: Re	eport on a separate lin	e for each cl	ass of sec	urities bene	ficially ow	ned directly	or indirectly.				
							espond to the colle		SEC 1474		
					inforn	nation cor	ntained in this form	n are not	(9-02)		

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	6. Date Exercisable and	7. Title and Amount
Derivative Security	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securiti
(Instr. 3)	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	(A Di (D (In	cquired () or () isposed () () () () () () () () () ()	of				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Share
Non-Employee Director Stock Option	\$ 30.65	05/10/2005		А	8,	,000		(1)	05/10/2015	Common Stock	8,00

Reporting Owners

Reporting Owner Name / Address							
	Director	10% Owner	Officer	Other			
ISTOCK VERNE G MAIL CODE IL 1-0554 1 BANK ONE PLAZA CHICAGO, IL 60670-0554	Х						
Signatures							
Eugene A. Gargaro, Jr. by Pow Attorney	ver of	0	5/11/200)5			
<u>**</u> Signature of Reporting Person	1	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) The foregoing option is exercisable cumulatively in annual installments of 20% commencing 05/10/2006.
- (2) Grant of option under Masco Corporation 1997 Non-Employee Directors Stock Plan, in transactions exempt under Rule 16b-3.

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.