HAZEL DARRYL B Form 4 May 18, 2011

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** OMB

Number:

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0.5

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if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

See Instruction 1(b).

(Last)

(City)

1.Title of

Security

(Instr. 3)

(Print or Type Responses)

1. Name and Address of Reporting Person \* HAZEL DARRYL B

(First)

(Street)

(State)

2. Issuer Name and Ticker or Trading Symbol

ALLIANT ENERGY CORP [LNT]

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

(Middle)

(Month/Day/Year)

3. Date of Earliest Transaction

(Month/Day/Year) 05/17/2011

X Director 10% Owner Officer (give title Other (specify

6. Individual or Joint/Group Filing(Check

below)

PO BOX 14720

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

MADISON, WI 53708-0720

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

(Zip)

4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially (D) or Owned Following

6. Ownership 7. Nature of Form: Direct Indirect Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(9-02)

(A) or

Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

654.675 (1) D

Common Stock

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

#### Edgar Filing: HAZEL DARRYL B - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5. Number of torDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, | Expiration D<br>(Month/Day/ | Expiration Date    |                 | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |      |
|---|---|---|--|---|-----------------------------|--------------------|-----------------|---|------|
|   |   |   | Code V                                 | and 5)  | ) Date<br>Exercisable       | Expiration<br>Date | Title           | Amount<br>or<br>Number<br>of Shares                                 |      |
| Deferred<br>Common<br>Stock                         | \$ 0  | 05/17/2011                              | A                                      | 99.597  | <u>(2)</u>                  | (2)                | Common<br>Stock | 99.597  | \$ 4 |

# **Reporting Owners**

| Reporting Owner Name / Address                           | Relationships |           |         |       |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|
| · · · · · · · · · · · · · · · · · · ·                    | Director      | 10% Owner | Officer | Other |  |  |  |
| HAZEL DARRYL B<br>PO BOX 14720<br>MADISON, WI 53708-0720 | X             |           |         |       |  |  |  |
|  |               |           |         |       |  |  |  |

## **Signatures**

/s/ F. J. Buri, by Power of Attorney 05/18/2011

\*\*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) Includes shares acquired under the company's dividend reinvestment plan, pursuant to a dividend reinvestment transaction exempt from Section 16 under Rule 16a-11.
- (2) Units are to be settled upon reporting person's retirement.

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.

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