TENNECO INC Form 4 January 04, 2010

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Section 16. Form 4 or Form 5 obligations may continue. See Instruction

Check this box

if no longer

subject to

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

SECURITIES

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * WARNER JANE L

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

TENNECO INC [TEN]

(First) (Middle) (Last)

3. Date of Earliest Transaction

(Month/Day/Year) 01/01/2010

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

(Check all applicable)

ILLINOIS TOOL WORKS, 3600 WEST LAKE AVENUE

(Street)

4. If Amendment, Date Original

3.

6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year)

4. Securities

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

below)

GLENVIEW, IL 60026

(City) (State) (Zip)

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

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of 6. Ownership 7. Nature of Securities Form: Direct Indirect Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported

D

(A) Transaction(s) or

(Instr. 3 and 4) Code V Amount (D) Price

Common Stock

11,010

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transac Code (Instr. 8 | Ctionof See 8) A (A D) (I) (I) | 5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | f Derivative Expiration Datecurities (Month/Day/Y Acquired A) or Disposed of D) Instr. 3, 4, | | ate | 7. Title and A Underlying S (Instr. 3 and | Securities | 8. I Der Sec (Ins |
|---|---|---|---|------------------------------------|--------------------------------|---|-----|--|--------------------|-----------------|---|------------|----------------------------|
| | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |
| Stock Equivalent Units | \$ 0 (1) | 01/01/2010 | | A | 1 | 1,772 | | (2) | (2) | Common Stock | 1,772 | \$ | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| WARNER JANE L ILLINOIS TOOL WORKS 3600 WEST LAKE AVENUE GLENVIEW, IL 60026 | X | | | | | | | |

Signatures

/s/ James D. Harrington, Attorney-in-fact for Jane L.
Warner 01/04/2010

**Signature of Reporting Person 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) 1-for-
- (2) Stock equivalent units awarded pursuant to Rule 16b-3 in payment of Board of Directors' fees, and are to be settled in cash or stock upon or following termination of service as a director.

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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