

ALLIANT ENERGY CORP  
Form 4  
May 11, 2007

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
HANSON THOMAS L

(Last) (First) (Middle)

PO BOX 2568

(Street)

MADISON, WI 53701

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol  
ALLIANT ENERGY CORP [LNT]

3. Date of Earliest Transaction  
(Month/Day/Year)  
05/10/2007

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)

VP, CONTROLLER, CAO

6. Individual or Joint/Group Filing(Check Applicable Line)  
 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**

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 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) |
|---------------------------------|--------------------------------------|--|--------------------------------|---|---|--|---|
|                                 |                                      |  | Code                           | V Amount (A) or (D) Price   |   |  |   |
| COMMON                          | 05/10/2007                           |  | M                              | 3,774 A \$ 31.54  | 5,050.824   | D  |   |
| COMMON                          | 05/10/2007                           |  | S                              | 3,774 D \$ 45.03  | 1,276.824   | D  |   |
| COMMON                          | 05/10/2007                           |  | M                              | 548 A \$ 25.93  | 1,824.824   | D  |   |
| COMMON                          | 05/10/2007                           |  | S                              | 548 D \$ 45.03  | 1,276.824   | D  |   |
| COMMON                          | 05/10/2007                           |  | J <sup>(1)</sup>               | 12 A \$ 0   | 1,288.824   | D  |   |
| COMMON                          | 05/10/2007                           |  | S                              | 512 D   | 776.824   | D  |   |

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\$  
44.56

|                        |           |   |
|------------------------|-----------|---|
| COMMON<br>DRIP         | 5,549.886 | D |
| 401(k)                 | 4,511.69  | D |
| COMMON<br>(RESTRICTED) | 1,136.326 | 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.**

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(9-02)

**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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | Amount or Number of Shares |  |
|--|--|--------------------------------------|--|--------------------------------|---|--|---|----------------------------|--|
|  |  |                                      |  | Code                           | V (A) (D)   | Date Exercisable   | Expiration Date   | Title                      |  |
| EMP. STOCK OPTION (Right to Buy)           | \$ 25.93   | 05/10/2007                           |  | M                              | 548   | 02/09/2005 02/09/2014                                    | COMMON  | 548                        |  |
| EMP. STOCK OPTION (Right to Buy)           | \$ 31.54   | 05/10/2007                           |  | M                              | 3,774   | 01/02/2002 01/02/2011                                    | COMMON  | 3,774                      |  |

## Reporting Owners

| Reporting Owner Name / Address | Relationships |           |                     |       |
|--------------------------------|---------------|-----------|---------------------|-------|
|                                | Director      | 10% Owner | Officer             | Other |
| HANSON THOMAS L<br>PO BOX 2568 |               |           | VP, CONTROLLER, CAO |       |

MADISON, WI 53701

## Signatures

Joni Aeschbach as  
POA for

05/11/2007

\_\_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) The reporting person acquired 12 shares under the broker's dividend reinvestment plan, pursuant to a dividend reinvestment transaction exempt from Section 16 under Rule 16a-11.

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.