SHULMAN JOHN D

Form 5

January 27, 2005

FORM 5

OMB APPROVAL

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

Number:

Expires:

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2005

1.0

no longer subject to Section 16. Form 4 or Form

Check this box if

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per

response...

5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

Reported Form 4

30(h) of the Investment Company Act of 1940

Transactions

1. Name and Address of Reporting Person *

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Reported

SHULMAN JOHN D

Symbol ALLIED CAPITAL CORP [ALD]

(Check all applicable)

(Last)

(First) (Middle) 3. Statement for Issuer's Fiscal Year Ended

Director

(Month/Day/Year)

Filed(Month/Day/Year)

X

10% Owner Other (specify

12/31/2004

_ Officer (give title below)

below)

1919 PENNSYLVANIA AVENUE, NW, 3RD FLOOR

(Street)

4. If Amendment, Date Original

6. Individual or Joint/Group Reporting

(check applicable line)

Managing Director

WASHINGTON, DCÂ 20006

X Form Filed by One Reporting Person Form Filed by More than One Reporting

(City)

(State)

(Zip)

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

1. Title of Security (Instr. 3)

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

(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 at end of Issuer's

6. Ownership Form: Direct (D) or Indirect (I)

(Instr. 4)

7. Nature of Indirect Beneficial Ownership (Instr. 4)

or

Amount (D) Price

(A)

Fiscal Year (Instr. 3 and 4)

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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pri
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	of	Expiration Date	Underlying Securities	Deriv
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securities			(Insti

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	Derivative Security			Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)							
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	\$ 24.62	10/01/2004	Â	J	200	Â	(1)	(2)	Common Stock	200	\$ 2
Phantom Stock Units	\$ 26.145	12/31/2004	Â	J	289	Â	(1)	(2)	Common Stock	289	\$ 26

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Othe			
SHULMAN JOHN D							
1919 PENNSYLVANIA AVENUE, NW	Â	Â	Managing Director	Â			
3RD FLOOR	Λ	Α	A Managing Director	А			
WASHINGTON, DC 20006							

Signatures

Reporting Person

s/ John D.
Shulman

**Signature of 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 phantom stock units were awarded under the Allied Capital Corporation Deferred Compensation Plan II and are fully vested.
- (2) Upon termination, phantom stock units will be distributed over a two year period or immediately upon a change in control.

Â

Remarks:

Pertains to phanton stock acquired pursuant to a dividend reinvestment plan. Â The acquisition of the Note: File three copies of this Form, one of which must be manually signed. If space provided 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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