## Edgar Filing: AGL RESOURCES INC - Form 4

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Form 4	NC								
September 30, 2014									
FORM 4	UTED STATES	SECU	DITIES A	ND EV(		COMMISSIO	AT -	PPROVAL	
UN	Number:	3235-0287							
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								Expires: January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type Responses)									
1. Name and Address of R SOMERHALDER JC	2. Issuer Name <b>and</b> Ticker or Trading Symbol AGL RESOURCES INC [GAS]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First)	(Middle)	3. Date of Earliest Transaction							
TEN PEACHTREE P	(Month/Day/Year) 09/26/2014			X Director 10% Owner X Officer (give title Other (specify below) below) Chairman, President and CEO					
(Street) ATLANTA, GA 3030	4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting Person</li> </ul>					
(City) (State)	(Zip)	Tał	ole I - Non-F	)erivative S	Securities A	cquired, Disposed	of. or Beneficia	llv Owned	
1.Title of 2. Transacti Security (Month/Day (Instr. 3)	on Date 2A. Deem y/Year) Execution any (Month/D	ed Date, if	3. Transaction Code (Instr. 8) Code V	4. Securitie Acquired ( Disposed c (Instr. 3, 4	es A) or of (D)	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	
Reminder: Report on a sep	arate line for each c	lass of sec	urities benef	Person inform require	as who res ation cont ed to resp /s a curre	or indirectly. spond to the collect tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

 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 of	6. Date Exercisable and	7. Title and Amount of	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Se

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired ( or Dispose (D) (Instr. 3, 4, and 5)	d of					(1
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common Stock Equivalent Units (CSEs)	\$ 0	09/26/2014		А		51.358		<u>(1)</u>	<u>(2)</u>	Common Stock	51.358	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
I G G G G G G G G G G G G G G G G G G G	Director	10% Owner	Officer	Other				
SOMERHALDER JOHN W II TEN PEACHTREE PLACE ATLANTA, GA 30309	Х		Chairman, President and CEO					
Signatures								
Michelle Johnson, by power of attorney		09/30/20	014					
**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) Immediately.

The units are to be settled in cash upon the reporting person's termination of employment based on the fair market value of the Company's (2) common stock as of the date of valuation. The reporting person may transfer the value of his common stock equivalent units into an alternative investment account at any time prior to settlement.

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.