**QUESTAR CORP** 

Form 4

September 09, 2014

FORM 4
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# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Number: January 31,

2005

**OMB APPROVAL** 

subject to Section 16. Form 4 or Form 5

SECURITIES

Estimated average burden hours per response... 0.5

obligations may continue.

See Instruction

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 Instruct

(Print or Type Responses)

1. Name and Address of Reporting Person \*

2. Issuer Name **and** Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Bradley R Allan

Symbol
QUESTAR CORP [STR]

(Check all applicable)

(Last)

(City)

(First) (Middle)

3. Date of Earliest Transaction

\_\_\_\_ Director \_\_\_\_\_ 10% Owner

333 SOUTH STATE STREET

(Month/Day/Year)

\_\_X\_\_ Officer (give title \_\_\_\_ Other (specify below)

09/05/2014

Executive Vice President

6. Individual or Joint/Group Filing(Check

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

**SALT LAKE CITY, UT 84145-0433** 

(State)

(Street)

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

(Zip)

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

red 5. Amo
(D) Securiti
Benefic
Owned
Followi

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

5. Amount of 6. Owner Securities Form: Di Beneficially (D) or Owned Indirect (Following (Instr. 4)

Ι

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

(A) or Code V Amount (D)

Reported
Transaction(s)
(Instr. 2 and 4)

28.7802 (1)

(Instr. 3 and 4)

401k Plan

Common Stock

Common

Stock

09/05/2014

F 2,057 D

\$ 23.62.

Price

126,274 (2) D

401k Plan

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.

SEC 1474 (9-02)

#### Edgar Filing: QUESTAR CORP - Form 4

## 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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day	ate	7. Title and Underlying (Instr. 3 and	Securities
				Code V	(A) (D	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock Units	\$ 0	09/08/2014		A	841.5154	(3)	(3)	Phantom Stock Units	841.5154

### **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Bradley R Allan 333 SOUTH STATE STREET SALT LAKE CITY, UT 84145-0433

**Executive Vice President** 

#### **Signatures**

Julie A. Wray, Attorney o9/09/2014 in Fact

\*\*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) As of September 8, 2014, I have 28.7802 shares of stock in Questar's 401k Plan
- (2) I received a distribution of formerly restricted shares of stock and made an advance election to satisfy my tax obligations by selling shares to Questar.
- (3) Phantom stock units will be converted to cash per my elections on or within 5 years of my termination of employment (subject to 6-month delay if necessary to comply with IRC 409A), or upon my death or Disability.

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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