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DIRECTV													
Form 4													
February 25,	2015												
FORM	4		CECU				CHLANK				OMB A	PPROV	۹L
	UNITED	STATES				ND EX D.C. 20		GE	COMMISSION	N	OMB Number:	3235	-0287
Check thi	or										Expires:	Janua	
if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP (SECURITIES							VNERSHIP OF	•	Estimated a burden hou	2005			
	Form 4 or									response	•	0.5	
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17(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 F	Responses)												
1. Name and Address of Reporting Person <u>*</u> Cho Jennifer			2. Issuer Name and Ticker or Trading Symbol DIRECTV [DTV]						5. Relationship of Reporting Person(s) to Issuer				
(Least)		3. Date of Earliest Transaction						(Check all applicable)					
(Last) (First) (Middle) C/O DIRECTV, 2260 EAST IMPERIAL HIGHWAY			(Month/Day/Year) 02/23/2015					Director 10% Owner X_ Officer (give title Other (specify below) Senior VP and Treasurer					
(Street)			4. If Amendment, Date Original						6. Individual or Joint/Group Filing(Check				
EL SEGUNDO, CA 90245			Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
	20,01170210								Person				
(City)	(State)	(Zip)	Tab	ole I - Nor	n-D	erivative	Securitie	es Ac	quired, Disposed	of,	or Beneficia	lly Owne	d
	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Day	Date, if	Code (Instr. 8)	tion)		(A) or of (D) 4 and 5) (A) or		Securities Beneficially	For (D) (I)	Ownership rm: Direct) or Indirect str. 4)	7. Nature Indirect Benefici Ownersh (Instr. 4)	al nip
				Code V	V	Amount	(D) Pri	ice	, , , , , , , , , , , , , , , , , , , ,				
Reminder: Rep	ort on a separate line	e for each cla	uss of sec	urities bei	nefi	-		-	-				
						inforn requii	nation co red to rea ays a cur	onta spo	oond to the colle ined in this form nd unless the fo tly valid OMB co	n ai rm	re not	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	6. Date Exercisable and	7. Title and Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deriv
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquire (A) or Dispose (D) (Instr. 3 and 5)	d of					(Inst
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Unit	\$ 87.26 (1)	02/23/2015		А		4,298 (2)		(3)	(3)	Common Stock	4,298	\$

Reporting Owners

Reporting Owner Name / Address			Relationships				
	Director	10% Owner	Officer	Other			
Cho Jennifer C/O DIRECTV 2260 EAST IMPERIAL HIGHWAY EL SEGUNDO, CA 90245			Senior VP and Treasurer				
Signatures							
Janet L. Williamson, Attorney-in-Fact	02/2	25/2015					
**Signature of Reporting Person	I	Date					
Explanation of Bosno	neae						

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 number of restricted stock units is based on the closing price of the common stock on February 20, 2015 of \$87.26.
- (2) The restricted stock units confer no voting rights and may not be sold, but automatically settle for an equivalent number of shares of common stock of the Issuer on the relevant distribution date.
- (3) These restricted stock units are granted pursuant to Rule 16b-3 qualified Incentive Plan (DIRECTV 2010 Stock Plan). The grant is time-vesting and will vest on December 31, 2017.

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.