EL PASO ELECTRIC CO /TX/

Form 4 January 03, 2017

FORM 4

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

OMB Number: 3235-0287

burden hours per

response...

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
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OMB APPROVAL

Form 4 or Form 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

1(b).

(Print or Type Responses)

| 1. Name and A Allen Cather | Symbol | 2. Issuer Name and Ticker or Trading Symbol EL PASO ELECTRIC CO /TX/ [EE] | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
|----------------------------|---------------------|---|---------------------------------|-------------|--|----------------------------|---|---------------------------|--------------|
| (Last) | (First) (N | | 3. Date of Earliest Transaction | | | | (Check all applicable) | | |
| (Zust) | (1.130) | , | (Month/Day/Year) | | | _X_ Director | 109 | 6 Owner | |
| • | | | 12/30/2016 | | | | Officer (gives) | ve titleOth below) | er (specify |
| (Street) 4. If A | | | . If Amendment, Date Original | | | | 6. Individual or Joint/Group Filing(Check | | |
| | | Filed(Mon | Filed(Month/Day/Year) | | | | Applicable Line) _X_ Form filed by One Reporting Person | | |
| EL PASO, TX 79901 | | | | | | | Form filed by More than One Reporting Person | | |
| (City) | (State) | (Zip) Table | e I - Non-D | erivative S | Securi | ties Ac | quired, Disposed | of, or Beneficia | lly Owned |
| 1.Title of | 2. Transaction Date | | 3. | 4. Securi | | | 5. Amount of | 6. Ownership Form: Direct | 7. Nature of |
| Security (Instr. 3) | (Month/Day/Year) | | | | | Securities Beneficially | Indirect Beneficial | | |
| (msu. 3) | | any (Month/Day/Year) | (Instr. 8) | r | | Owned | (D) or Indirect (I) | Ownership | |
| | | | | | | | Following | (Instr. 4) | (Instr. 4) |
| | | | | | (A) or | | Reported Transaction(s) | | |
| | | | Code V | Amount | (D) | Price | (Instr. 3 and 4) | | |
| | | | | | | | | | |

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)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of Derivative Security (Instr. 3) | ve Conversion or Exercise | 3. Transaction Date (Month/Day/Year) | 4. Transact Code (Instr. 8) | 5. orNumber of Derivativ Securitie Acquired (A) or Disposed of (D) (Instr. 3, | 6 | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr | |
|--|---------------------------|---|--------------------------------------|---|---|--------------------|---|---|---|--|
| | | | Code V | 4, and 5) (A) (D) | | Expiration Date | 0 N 0 | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|-------------------------------------|---------------|-----------|---------|-------|--|--|--|
| FB | Director | 10% Owner | Officer | Other | | | |
| Allen Catherine A 100 N. STANTON | X | | | | | | |
| EL PASO, TX 79901 | | | | | | | |

Signatures

/s/ Michelle Pedroza, attorney-in-fact for Catherine A.
Allen
01/03/2017

**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).

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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