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QUESTAR CORP Form 4

January 16, 2003

FORM 4

o Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, DC 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(f) of the Investment Company Act of 1940 OMB APPROVAL

OMB

Number: 3235-0287 Expires: January 31,

2005

Estimated average

burden hours per response 0.5

(Print or Type Responses)

1 Name and Address of	Reporting Person*		2 IN	1 77: 11	6 Dalatianship of Dana								
1. Name and Address of Reporting Person* Rose, D. N.			2. Issuer Name and Tickler or Trading Symbol Questar Corporation - STR							6. Relationship of Repo to Issuer (Check all a)			
										Directo	in0% Owner		
									X	Officer (give title below)			
			Executive Vice										
(Last)	(First)	(Middle)	3. I.R.S. Identification Number of Reporting Person, if an entity 4. Statement for Month/Day/Year										
180 East 100 South, P.O. Box 45360			(voluntary)		January 15, 2003 5. If Amendment, Date of		7. Individual or Joint/Go (Check Applicable Line						
			Form filed by One Person										
(Street)			Original (Month/Day/Year)						П	Form filed by Mor Reporting Person			
Salt Lake Ci	ty, Utah 8414:	5-0360								пероп	mg r crson		
(City)	(State)	(Zip)	Table I Non-Derivative Securities Acquired, D							ed of, o	r Beneficiall		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/	action Deemed Execution Date, if		s- n :.8) V	1		f (D)	of Se Be	n outO wner- ship curi ffer m: enefi Didly t vned(D) or			

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		L	ugai i iiiiig.	QULSTA		- 1 OIII	. +					
			Da Ye	•	(Month/ Day/ Year)				(A) or (D)		Re Tra	llowlimetrect ported ansaction(s (Instr. 4) str.
Common Sto Stock Purcha	ock (and attacluse Rights)	on 01-1:	5-2003		F		7,800	D	\$28.34			
Common Sto Stock Purcha	ock (and attacluse Rights)	on 01-1:	5-2003		F		200	D	\$28.37	75,97	/8D	
Common Sto Stock Purcha	ock (and attacl ase Rights)	on								46,76	0I1374	
TOW!			_	Fabla II I	Porivativa (to the information in this require unless displate a current control	e collemations formation for the second the second for the second	valid OM mber.	ed IB	14 (9-0	2)	icially Ow
FORM 4 (continued)					Derivative $(e.g., puts,$							•
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. Trans- action Code (Instr.	5. Number of Deriver ative Securities Acquirect (A) or Disposed of (D) (Instr.	es C	isabl Expir Date	e and ation th/Day/	Amo Un Secur	tle and unt of nderlying rities astr. 3 and	<u>1</u>	Price 9 of Derivative Security (Instr. 5)

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				3, 4 and 5)						a
		Code	V	(A)	(D)	Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares	
Stock Option										11
Phantom Stock Units										14,3

Explanation of Responses:

- 1 These equivalent shares are allocated to my account in Questar's Employee Investment Plan as of January 15, 2003.
- 2 These numbers include vested options only. Detailed information concerning my options has been previously disclosed.
- 3 I receive phantom stock units as a result of my participation in an excess benefit plan sponsored by Questar. This total includes the 14,036.6291 phantom stock units in such plan in addition to the phantom stock units held through my account in a deferred compensation plan.

January 16, /s/ Connie C. Holbrook 2003 Connie C. Holbrook as Date Intentional misstatements or omissions of facts constitute Attorney in Fact Federal Criminal Violations. for D. N. Rose See **Signature of Reporting Person 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.