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# CASH R D Form 4

November 27, 2002

#### 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*  Cash, R. D.			2. Issuer Nar	me <b>and</b> Tickl	6. Relationship of Reporto Issuer (Check all ag				
				Questar Con	X	Directdi0% Owner			
							OfficeOther (speci (give below) title below)		
								Chairman of th	
(Last) 180 East 1	(First) 00 South, P.O. Bo	3. I.R.S. Ider Reporting (voluntary)	Person, if an	7. Individual or Joint/Gi (Check Applicable Line					
					Form filed by One Person				
(Street) Salt Lake City, Utah 84145-0433			Original (Month/Day/Year)					Form filed by More Reporting Person	
(City)	(State)	(Zip)	Table	ed of, or Beneficiall					
1. Title of Section (Instr. 3)	urity		2. Transaction Date	2A. Deemed Execution Date, if	3. Trans action Code (Instr.	(A) or Disposed of	(D)	5. Amoundwner- of ship Securificam: BenefiDinklyt	

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			Da		any (Month/ Day/ Year)	Code	V	Amount	(A) or (D)	Price	Fol Rej Tra	vnedD) o llowlimgire portAd ensaction (Instr. 4 str.	ect (s)
Common Sto Stock Purcha	ock (and attach ase Rights)	ned Commo	on 11-2	25-2002		F		3,000	D	\$27.00	235,3	352	
Common Stock (and attached Common Stock Purchase Rights)											82,0	14.3662	
Common Sto Stock Purcha	ock (and attach ase Rights)	ned Commo	on 11-2	25-2002		F		1,000	D	\$27.00	28,40	<b>OO</b>	
Common Sto Stock Purcha	ock (and attachase Rights)	hed Commo	on n				Γ				6,152	2 D	
						requir unless displa a curr OMB numb	ond to ctior mati- ined s for red t s the ays rentl 3 cor-	o the of on learn are not to respond form y valid				02)	
FORM 4 (continued)				Гable II	Derivative (e.g., puts,								wne
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Transaction Date  (Month/Day/	3A. Deemed Execution Date, if any	4. Tran actio Code (Inst	on of Deriv	v- ci E ies D (N	isabl xpir Oate	e and ation th/Day/	Amor Un Secur	tle and unt of nderlying rities astr. 3 and	d .	Price of Deriv- ative Secur- ity	9. ] c a S ii

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	Security	Year)	(Month/ Day/ Year)			(A) or Disposed of (D) (Instr. 3, 4 and 5)						(Instr. 5)	f C F in F T a
				Code	V	(A)	(D)	Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares		
Stock Option													890
Phantom Stock Units	1-1												<b>5</b> 8, 3, 4

Explanation of Responses:

- 1 These equivalent shares are allocated to my account in Questar's Employee Investment Plan as of November 25, 2002.
- 2 Detailed information concerning my options has been previously disclosed. All of my options that had not yet vested vested at the date of my retirement (May 1, 2002).
- 3 I have account balances in several different deferred compensation plans. Although I don't earn fees as a director or compensation as an employee, my account balances in such plans are credited with dividends on a quarterly basis.
- 4 Prior to my retirement, I received phantom stock units as a result of my participation in an excess benefit plan sponsored by Questar. Although I no longer earn compensation, my account balance is credited with dividends. This total includes the 47,267.8477 phantom stock units in such plan in addition to the phantom stock units held through account balances in deferred compensation plans.

\*\* Intentional misstatements or omissions of facts constitute
Federal Criminal Violations.

See

\*\*Signature of Reporting Person

November 26, 2002

Connie C. Holbrook as Attorney in Fact for R. D. Cash

\*\*Rignature of Reporting Person

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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.