## Edgar Filing: DELTA AIR LINES INC /DE/ - Form 4

DELTA AIR Form 4 July 18, 2005	LINES INC /D	Е/									
FORM	Л								OMB AF	PROVAL	
	UNITED	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 193- Section 17(a) of the Public Utility Holding Company Act of 1935 or Security 30(h) of the Investment Company Act of 1940						Act of 1934, 935 or Section	Expires: January 31, 2005 Estimated average burden hours per response 0.5				
(Print or Type Ro	esponses)										
HIGGINS PATRICIA Symbol DELT			Symbol	A AIR LINES INC /DE/				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(First) ( LINES, INC., 1 D. BOX 20574	Middle) DEPT.		of Earliest T Day/Year) 2005	ransaction		_	_X_ Director Officer (give the below)		Owner r (specify	
				onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
ATLANTA,,	GA 30320						-	Form filed by Mo Person			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative Se	curitie	s Acqui	ired, Disposed of,	or Beneficiall	y Owned	
	2. Transaction Date (Month/Day/Year)		Date, if		4. Securities onor Disposed (Instr. 3, 4 an Amount	of (D)	red (A) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	07/15/2005			А	3,896.104 (1)	A	\$ 3.85	3,896.104	D		

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.

 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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exer	cisable and	7. Title and A	Amount of
Derivative	Conversion	(Month/Day/Year)	/Year) Execution Date, if TransactionDerivative		Expiration D	Expiration Date		Underlying Securities	
Security	or Exercise		any	Code	Code Securities		(Month/Day/Year)		4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A) or				
	Derivative				Disposed of (D)				
	Security				(Instr. 3, 4, and 5)				
				Code V	(A) (D	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock Units	(2)	07/15/2005		А	1,573.597	(2)	(2)	Common Stock	1,573.597 (2)

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
HIGGINS PATRICIA DELTA AIR LINES, INC., DEPT. NO. 981 P.O. BOX 20574 ATLANTA,, GA 30320	Х					
Signatures						
Nanci Oliver Sloan as attorney-in-fact for Path Higgins	ricia L.	0	7/18/200	)5		

\*\*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) Shares acquired under Delta's Non-employee Directors' Stock Plan in a transaction exempt under Rule 16b-3(d).

Phantom Stock Units were accrued under Delta's Non-employee Directors' Deferred Compensation Plan in a transaction exempt under (2) Rule 16b-3(d). They are convertible into Delta common stock on a 1-for-1 basis. The deferred amounts will be paid, in cash, to the reporting person after she completes her service as a member of Delta's Board of Directors.

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.

Date