Carter Ashton B

FORM	RM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549				OMB	PPROVAL		
							Number:	3235-0104
	INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF						Expires:	January 31, 2005
	SECURI Filed pursuant to Section 16(a) of the Section 17(a) of the Public Utility Holdi				Securities Exchange Act of 1934, ing Company Act of 1935 or Sectio			average urs per . 0.5
(Print or Type F	(esponses)	31	0(h) of the Investme	ent Company Ac	t of 1940			
(Thit of Type I	(csponses)							
Person *	Name and Address of Reporting erson <u>*</u> Carter Ashton B		2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Syr DELTA AIR LINES INC /DE/ [D			
(Last)	(First)	(Middle)	10/23/2017		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)	
C/O DELTA INC., P.O. 981		· · · · · · · · · · · · · · · · · · ·		(Check	all applicable))		
981	(Street)			Officer	(give title below) (specify below) Fili		dividual or Joint/Group g(Check Applicable Line) Form filed by One Reporting	
ATLANTA,	GA 3	30320					on Form filed by Mo orting Person	re than One
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned					
1.Title of Secu (Instr. 4)	J		unt of Securities sially Owned }			of Indirect Benef	ficial	
Common Ste	ock		0		D	Â		
Reminder: Rep owned directly			ch class of securities be	eneficially S	SEC 1473 (7-02	2)		
	info requ	rmation conta ired to respo	pond to the collectio ained in this form are nd unless the form o MB control number.	e not				
Т	`able II - D	erivative Secu	rities Beneficially Own	ed (e.g., puts, calls	, warrants, op	tions, conve	rtible securitie	s)
						_		

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relations				
	Director	10% Owner	Officer	Other		
Carter Ashton B C/O DELTA AIR LINES, INC. P.O. BOX 20574, DEPT. 981 ATLANTA, GA 30320	ÂX	Â	Â	Â		
Signatures						
/s/ Jan M. Davidson as attorney-i Carter		10/25/2017				
<u>**</u> Signature of Reporting		Date				
Fundamentian of Deensoneers						

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).

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Remarks:

Exhibit 24 - Power of Attorney

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.