

QUESTAR CORP
Form 4
February 05, 2003

FORM 4

UNITED STATES SECURITIES AND
EXCHANGE COMMISSION
Washington, DC 20549

- o 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

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
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(Print or Type Responses)

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol		6. Relationship of Reporter to Issuer (Check all applicable)	
Allred, Alan K.			Questar Corporation - STR		☐ Director ☒ 10% Owner ☒ Officer (give title below) ☐ Other (specify below) Executive Officer	
(Last)	(First)	(Middle)	3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)	4. Statement for Month/Day/Year	7. Individual or Joint/Group (Check Applicable Line)	
180 East 100 South, P.O. Box 45360				February 3, 2003	☐ Form filed by One Person ☐ Form filed by More Reporting Persons	
(Street)			5. If Amendment, Date of Original (Month/Day/Year)			
Salt Lake City, Utah 84145-0360						
(City)	(State)	(Zip)	Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)
						5. Amount of Securities Beneficially Owned (D) or
						6. Ownership Form: Beneficially Owned (D) or

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	Day/ Year)	(Month/ Day/ Year)	Code	V	Amount	(A) or (D)	Price	Followed Reported Transaction(s) (Instr. 4) (Instr. 3 and 4)	Indirect (Instr. 4)
Common Stock (and attached Common Stock Purchase Rights)	02-03-2003		S		421	D	\$28.22	14,375 ¹	D
Common Stock (and attached Common Stock Purchase Rights)								20,657 ¹	4579 ²

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

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(9-02)

FORM 4 (continued)	Table II Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 3)	2. Conver- sion or Exercise Price of Deri- vative Security	3. Trans- action Date (Month/ Day/ Year)	3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Trans- action Code (Instr.8)	5. Number of Deriv- ative Securities Ac- quired (A) or Dis- posed of (D) (Instr. 3, 4 and	6. Date Exer- cisable and Expiration Date (Month/Day/ Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Deriv- ative Secur- ity (Instr. 5)	9. I c a S i E f C F i F T	

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				5)				Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares		
				Code	V	(A)	(D)						
Stock Option													55.
Phantom Stock Units	1-1												44.

Explanation of Responses:

- 1 I received a distribution of formerly restricted shares of stock and made an advance election to satisfy my tax payment obligations by selling shares to Questar.
- 2 These equivalent shares are in my account in Questar's Employee Investment Plan as of December 31, 2002.
- 3 These numbers include vested options only. Detailed information concerning my options has been previously disclosed.
- 4 I receive phantom stock units as a result of my participation in a deferred compensation plan sponsored by Questar.

/s/ Connie C. Holbrook

February 4, 2003

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

Connie C. Holbrook as Attorney in Fact
for Alan K. Allred

Date

See

18 U.S.C. 1001 and 15 U.S.C.
78ff(a).

**Signature of Reporting Person

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.