Edgar Filing: Eldred Charles N - Form 4

Eldred Charl	les N											
Form 4												
March 15, 20	012											
FORM	14									OMB AF	PROVAL	
	UNITED	STATES				ND EX(D.C. 205		NGE C	OMMISSION	OMB Number:	3235-0287	
Check th										Expires:	January 31,	
if no long subject to		IENT O	F CHAN	GES I	[N]	BENEFICIAL OWNERSHIP OF			Estimated average			
Section 1				SECU	UR	ITIES				burden hour		
Form 4 o	r									response	0.5	
Form 5								-	e Act of 1934,			
obligatio may cont				•		•	- ·		1935 or Section	1		
See Instruction 1(b).		30(h)	of the In	vestme	ent	Compan	y Act	of 194	0			
(Print or Type I	Responses)											
1. Name and A	Address of Reporting 1	Person <u>*</u>	2. Issue	r Name a	and	Ticker or '	Гradin	g	5. Relationship of	Reporting Pers	on(s) to	
Eldred Charles N Symbol				C C					Issuer			
				RESOURCES INC [PNM]					(Check all applicable)			
(Last)	(First) (N	/liddle)	3. Date of	f Earlies	t Tr	ansaction			(Check	k an applicable)	
			(Month/E	onth/Day/Year)					Director	10%	Owner	
			/15/2012					XOfficer (give titleOther (specify below)				
									· · · · · · · · · · · · · · · · · · ·	EC VP, CFO		
	(Street)		1 If Ame	ndment	Da	te Original					g(Check	
	(bucct)			Amendment, Date Original d(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)			
Filed(Mol				Shull Day (Teal)					_X_ Form filed by One Reporting Person			
ALBUQUE	RQUE, NM 8715	8							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	le I - No	n-D	erivative S	Securi	ties Acqu	uired, Disposed of,	, or Beneficial	y Owned	
1.Title of	2. Transaction Date			3.		4. Securiti		•	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution	n Date, if		ctio	(Instr 2			Securities Beneficially	Ownership Form: Direct	Indirect	
(Instr. 3)		any (Month/E	Code (Instr. 3, 4 and 5) (Instr. 8)				')	Owned	Form: Direct Be (D) or Ov	Ownership		
		((~)				Following	Indirect (I)	(Instr. 4)	
							(A)		Reported	(Instr. 4)		
							or		Transaction(s) (Instr. 3 and 4)			
				Code	V	Amount	(D)	Price	(insu: 5 and 4)			
Common Stock	03/15/2012			S		15,500 (1)	D	\$ 18.45	66,689	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 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. Transacti Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	7. Title and A Underlying S (Instr. 3 and	Securities	8. Price of Derivative Security (Instr. 5)
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options	<u>(2)</u>					(3)	(4)	Common Stock	66,670	

Reporting Owners

Reporting Owner Name / Addr	'ess	Relationships							
	Director	10% Owner	Officer	Other					
Eldred Charles N ALVARADO SQUARE MS-2850 ALBUQUERQUE, NM 871	158		EXEC VP, CFO						
Signatures									
Charles N. Eldred	03/15/2012								

<u>**</u>Signature of Reporting Person

Date

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) The stock was sold for the purpose of providing a source of funds for payment of tax liability relating to the vesting of equity awards received under the Omnibus Performance Equity Plan.
- (2) Based on the closing price on the date of the grant.
- (3) The options vest in three equal annual installments from grant date of issuance.
- (4) The options expire 10 years from grant date.

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.