## Edgar Filing: NATIONAL FUEL GAS CO - Form 4

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July 05, 201	6											
FORM								OMB APPROVAL				
		SECURITIES AND EXCHANGE CON Washington, D.C. 20549						OMB Number:	3235-0287			
Check th if no lon subject t Section Form 4 o Form 5	ger STATI o STATI 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									Expires:January 31 2001Estimated average burden hours per response0.1	
obligatic may con <i>See</i> Instr 1(b).	tinue. Section 1	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(h) of the Investment Company Act of 1940										
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> Carroll David C.			2. Issuer Name <b>and</b> Ticker or Trading Symbol NATIONAL FUEL GAS CO [NFG]						5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Check	(Check all applicable)			
GAS TECHNOLOGY INSTITUTE, 1700 S MOUNT PROSPECT ROAD			(Month/Day/Year) 07/01/2016						X_ Director 10% Owner Officer (give title Other (specify below) below)			
				Amendment, Date Original Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
DES PLAI	NES, IL 60018								Form filed by M Person	ore than One Rep	porting	
(City)	(State)	(Zip)	Tab	le I - No	on-D	erivative	Secur	ities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deem Execution any (Month/Day/Year)			n Date, if Transactio Code			4. Securi n(A) or Di (Instr. 3,	spose 4 and	d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock (1)	04/15/2016			J	V	67	А	\$ 51.086	9,402	D		
Common Stock (2)	07/01/2016			А		600	А	\$ 56.9	10,002	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.

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 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. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address		Relationships							
	Director	10% Owner	Officer	Other					
Carroll David C. GAS TECHNOLOGY INSTITUTE 1700 S MOUNT PROSPECT ROAD DES PLAINES, IL 60018	, х								
Signatures									
J. P. Baetzhold, Attorney in Fact	07/05/2016	ō							
**Signature of Reporting Person	Date								
E									

## **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) Acquired through dividend reinvestment plan, exempt under Rule 16a-11.

(2) Acquired through quarterly grant under the National Fuel Gas Company 2009 Non-Employee Director Equity Compensation Plan.

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.