Edgar Filing: WGL HOLDINGS INC - Form 4

WGL HOLD	INGS INC											
Form 4												
January 04, 2	2008											
FORM	$ 4 _{\text{UNITED}}$		CECID	TTIES A		CILAI	NCE	COMMISSION		PPROVAL		
	- UNITED	SIAIE			, D.C. 20		NGE	COMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to STATEMENT OF CHANGES IN BENEFIC					,					January 31,		
					ICIA	LOW	NERSHIP OF	Expires: Estimated a	2005 average			
Section 1		SECURITIES							burden hours per			
Form 4 or Form 5		rsuant to	Section 16	5(a) of th	e Securi	ies F	vchan	ge Act of 1934,	response	0.5		
obligation	¹⁸ Section 17							of 1935 or Sectio	n			
may conti <i>See</i> Instru	inue.) of the Inv									
1(b).												
(Print or Type R	Pesnonses)											
(Thin of Type R	(esponses)											
1. Name and A	ddress of Reporting	g Person <u>*</u>	2. Issuer	Name and	l Ticker or	Tradin	ıg	•	of Reporting Person(s) to			
LEE DEBRA	Symbol					Issuer						
	WGL H	OLDING	GS INC [WGL]	(Check all applicable)						
(Last)	(First) ((Middle)	3. Date of Earliest Transaction					••				
				(Month/Day/Year) 01/02/2008				X_ Director 10% Owner Officer (give title Other (specify				
NW	ITOTION AVE	INUE,	01/02/20	108				below)	below)			
	(Street)		4. If Ame	ndment. Da	ate Origina	1		6. Individual or Jo	oint/Group Filir	19(Check		
				d(Month/Day/Year)				Applicable Line)				
								X Form filed by 0 Form filed by N	One Reporting Pe Iore than One Re			
WASHING	FON, DC 20080)						Person		porting		
(City)	(State)	(Zip)	Table	e I - Non-I	Derivative	Securi	ties Ac	quired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Da			3.	4. Secur			5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Year	 Execution any 	tion Date, if TransactionAcquired (A) or Code Disposed of (D)					Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(Instr. 5)		/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Owned	Indirect (I) Owners	Ownership			
								Following Reported	(Instr. 4)	(Instr. 4)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	01/02/2008			А	1,800	A (1)	\$0	11,960.2758	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)

Edgar Filing: WGL HOLDINGS INC - Form 4

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 Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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		Relationsh	ups		
FB	Director	10% Owner	Officer	Other	
LEE DEBRA L 101 CONSTITUTION AVENUE, NW WASHINGTON, DC 20080	Х				
Signatures					
Debra L. Lee, by Douglas V. Pope, pur Commission	suant to w	ritten author	ization f	iled with the	01/04/2008

**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).
- These shares acquired through Directors' Stock Compensation Plan in a transaction exempt under Rule 16b-3. Total shares include shares (1) acquired through reinvestment of dividends in Company's dividend reinvestment 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.

Date