## Edgar Filing: BOXLEY ABNEY S III - Form 4

| BOXLEY A   | BNEY S III                           |   |                                   |                            |   |        |             |   |  |   |  |
|--|--------------------------------------|---|-----------------------------------|----------------------------|---|--------|-------------|---|--|---|--|
| Form 4   | _                                    |   |                                   |                            |   |        |             |   |  |   |  |
| May 02, 201  |                                      |   |                                   |                            |   |        |             |   | OMB AF   | PROVAL  |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 |                                      |   |                                   |                            |   |        |             | OMB<br>Number:  | 3235-0287  |   |  |
| Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or       |                                      |   |                                   | GES IN<br>SECUR            |   | CIA    | L OWN       | NERSHIP OF  | Expires:January 31<br>2005Estimated average<br>burden hours per<br>response0.4 |   |  |
| Form 5<br>obligation<br>may cont<br><i>See</i> Instru<br>1(b).                 | inue. Section 17                     | (a) of the  | Public U                          |                            | ling Com                                    | ipany  | Act of      | e Act of 1934,<br>1935 or Sectior<br>0  | 1  |   |  |
| (Print or Type F   | Responses)                           |   |                                   |                            |   |        |             |   |  |   |  |
| BOXLEY ABNEY S III Sy.   |                                      |   | Symbol                            | r Name <b>and</b>          |   |        |             | 5. Relationship of Reporting Person(s) to Issuer  |  |   |  |
|  |                                      |   |                                   | ESOURC                     |   | KGC    | .0]         | (Check all applicable)  |  |   |  |
| (Last)<br>301 WILLO  | (First)                              | (Middle)<br>W   | 3. Date of<br>(Month/E<br>05/01/2 | -                          | ansaction                                   |        |             | X Director<br>Officer (give t<br>below)   |  | Owner<br>r (specify   |  |
|  |                                      |   |                                   | ndment, Da<br>nth/Day/Year | -   |        |             | <ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul> |  |   |  |
| ROANOKE  | , VA 24014                           |   |                                   |                            |   |        |             | Form filed by M<br>Person   | ore than One Rep   | porting   |  |
| (City)   | (State)                              | (Zip)   | Tab                               | e I - Non-D                | erivative S                                 | Securi | ties Acqu   | uired, Disposed of,   | or Beneficiall   | y Owned   |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction Da<br>(Month/Day/Year | Transaction Date2A. Deemedonth/Day/Year)Execution Date, ifany(Month/Day/Year) |                                   |                            | 4. Securiti<br>n(A) or Dis<br>(Instr. 3, 4) | sposed | of (D)      | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)                      | 6.<br>Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)        | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Common<br>Stock  | 05/01/2012                           |   |                                   | A <u>(1)</u>               | 36.331                                      | A      | \$<br>18.35 | 18,133.998<br>(2)   | 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: BOXLEY ABNEY S III - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | e | 4.<br>Transact<br>Code<br>(Instr. 8) | of<br>Deriv | vative<br>rities<br>uired<br>or<br>osed<br>O)<br>r. 3, |                     |                    | 7. Title and<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|--------------------------------------|-------------|--|---------------------|--------------------|---|--|---|--|
|   |   |   | Code V                               | ′ (A)       | (D)  | Date<br>Exercisable | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

Reporting Owner Name / AddressRelationshipsDirector10% OwnerOfficerOtherBOXLEY ABNEY S III<br/>301 WILLOW OAK DR SW<br/>ROANOKE, VA 24014XVVSignaturesVVVV

Abney S. Boxley, III by Howard T. Lyon, POA dated 03/25/02

\*\*Signature of Reporting Person

Date

05/02/2012

## **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) Shares purchased pursuant to the Restricted Stock Plan for Outside Directors of RGC Resources, Inc.
- (2) Includes 76.194 restricted shares purchased through dividends reinvested in the Restricted Stock 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.