Edgar Filing: RATCLIFFE DAVID M - Form 4

RATCLIFFE	E DAVID M											
Form 4												
December 16	5, 2005											
FORM						OMB AF	PROVAL					
Was				RITIES AND EXCHANGE COMMISSION shington, D.C. 20549				OMB Number: 32	3235-0287			
Check this box									Expires:	January 31,		
subject to	subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNERS				Estimated a	2005 Verage		
Section 1	6.					SECURITIES				burden hours per		
Form 4 or Form 5			~ • •		~ .				response	0.5		
obligatior	1 0						•	e Act of 1934,				
may conti				•	•	- ·		1935 or Section	1			
See Instru	iction	30(n)	of the In	vestment	Compan	y Ac	t of 194	0				
1(b).												
(Print or Type R	Responses)											
1. Name and Address of Reporting Person * 2. Issuer RATCLIFFE DAVID M Symbol			r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
			CSX CO	ORP [CSX	K]			(Chao)	k all applicable	`		
(Last)	(First) (Middle)	3. Date of	f Earliest Tra	ansaction			(Chec.	k all applicable)		
. , . , . ,			Day/Year)			XDirector10% Owner						
SOUTHERN COMPANY, 270 12/14/20			-			Officer (give title Other (specify below)						
PEACHTRE	EE ST. NW, BIN	915						below)	Delow)			
			ndment, Date Original			6. Individual or Joint/Group Filing(Check						
			_X				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
ATLANTA, GA 30303												
(City)	(State)	(Zip)								_		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Dat			3.4. Securities AcquiredTransactior(A) or Disposed of (D)Code(Instr. 3, 4 and 5)				5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Year)	any Executio	on Date, if					Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(Insu: 5) any (Month/Day/Year)			(Instr. 8)				Owned	Indirect (I)	Ownership			
								Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
						or	D ·	(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price ¢	. ,		By trustee		
stock	12/14/2005			A <u>(1)</u>	2,500	А	\$ 49.13	10,476	Ι	By trustee (2)		
Stook							17.15			_		

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)

1. Title c Derivativ Security (Instr. 3)	ve Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. iorNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration I (Month/Day e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and unt of rlying rities (1, 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code N		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
RATCLIFFE DAVID M SOUTHERN COMPANY 270 PEACHTREE ST. NW, BIN 915 ATLANTA, GA 30303	Х			
Signatures				
David M. Ratcliffe by Gordon F. Baile Attorney-in-Fact	y,	12/14/2005		
**Signature of Reporting Person			Da	ate

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) Stock award pursuant to CSX Stock Plan for Directors.
- By Trustee, CSX Corporation Stock Plan for Directors. The units are payable in cash after the reporting person ceases to be a director or (2) otherwise pursuant to the terms of the CSX Corporation Stock Plan for Directors.

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.