Edgar Filing: RATCLIFFE DAVID M - Form 4

RATCLIFFE	E DAVID M												
Form 4	<												
September 1													
FORM 4 UNITED STATES SECUR										,	OMB APPROVAL		
				SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287		
Check the if no long										Expires:	January 31, 2005		
subject to	S I A I	EMENT O	F CHAN		GES IN BENEFICIAL OWNERSHIP O					Estimated average			
Section 1						SECURITIES					burden hours per		
Form 4 o Form 5										response	0.5		
obligation		•						•	e Act of 1934,				
may cont	Section			•		•	- ·		f 1935 or Sectio	n			
See Instru	uction	30(n)	of the In	vestmei	nt C	Jompan	y Aci	. 01 194	+0				
1(b).													
(Print or Type I	Responses)												
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading 5. Relationship of							5. Relationship of	Reporting Person(s) to					
RATCLIFFE DAVID M Symbol									Issuer				
				CORP [CSX]					(Chec	k all applicable	a)		
(Last)	(First)	(Middle) 3. Date of Earliest Transaction				(Cliec	k all applicable	5)					
			(Month/D	ay/Year)					_X_ Director	10%	b Owner		
	ORATION, 50	00 WATER	09/15/20	009					Officer (give below)	title Oth below)	er (specify		
STREET C	160								0010W)	below)			
	(Street)		4. If Amer	ndment, l	Date	e Original			6. Individual or Jo	oint/Group Filin	ng(Check		
Filed(Mc				ed(Month/Day/Year)					Applicable Line)				
LACKGON		202							_X_ Form filed by 0 Form filed by N				
JACKSON	VILLE, FL 322	202							Person		1 0		
(City)	(State)	(Zip)	Table	e I - Non	-De	rivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction	Date 2A. Dee	med	3.		4. Securi	ties A	equired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye		on Date, if	Transad Code	ction	n(A) or Di	spose	d of	Securities	Form: Direct			
(Instr. 3)		any (Month/	any (Month/Day/Year)			(D) (Instr. 3,	4 and	5)	Beneficially (D) or Owned Indirect (I)		Beneficial Ownership		
		(intolitii)	Dujitout	(Instr. 8	,	(111511: 5),	i una	5)	Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported				
							or		Transaction(s) (Instr. 3 and 4)				
~				Code	V	Amount	(D)	Price	(msu. 5 and 4)				
Common stock	09/15/2009			A <u>(1)</u>		253	А	\$ 46.8	46,573	Ι	By Trustee (2)		

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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Titl Amou Under Secur (Instr.	int 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				
1	Director	10% Owner	Officer	Other
RATCLIFFE DAVID M CSX CORPORATION 500 WATER STREET C160 JACKSONVILLE, FL 32202	Х			
Signatures				
David M. Ratcliffe by Nathan Attorney-in-Fact	09/16/2009			
<u>**</u> Signature of Repor	ting 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).
- Exempt payment of director's fees and/or annual retainer in the form of CSX Common Stock pursuant to the CSX Corporation Stock Plan (1) for Directors.
- (2) By Trustee, CSX Corporation Directors' Stock Trust.

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.