EL PASO ELECTRIC CO /TX/

Form 4 May 30, 2014

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

Number:

3235-0287 January 31,

0.5

Expires:

ated average

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if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

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

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * CICCONI JAMES W | | | 2. Issuer Name and Ticker or Trading Symbol | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
|---|-------------------|-----------|--|---------------------|-------------|--------|--|--|--------------------|--------------|--|
| | | | EL PASO ELECTRIC CO /TX/ [EE] | | | | | (Check all applicable) | | | |
| (Last) | (First) | Middle) | 3. Date of | Earliest Tra | nsaction | | | | | | |
| (Mont | | | (Month/Da | (Month/Day/Year) | | | | | | % Owner | |
| 100 N. STANTON | | | 05/29/2014 | | | | | Officer (gives) | ve titleOth below) | er (specify | |
| (Street) | | | 4. If Amendment, Date Original | | | | | 6. Individual or Joint/Group Filing(Check | | | |
| | | | d(Month/Day/Year) | | | | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| EL PASO, TX 79901 | | | | | | | | | | | |
| (City) | (State) | (Zip) | Table | I - Non-D | erivative S | Securi | ties Ac | quired, Disposed | of, or Beneficia | lly Owned | |
| 1.Title of | 2. Transaction Da | te 2A. De | emed | 3. | 4. Securi | ties | | 5. Amount of | 6. Ownership | 7. Nature of | |
| Security (Month/Day/Year) Executive | | | on Date, if TransactionAcquired (A) or | | | | Securities | Form: Direct | Indirect | | |
| (Instr. 3) any | | | Code | ode Disposed of (D) | | | Beneficially | (D) or | Beneficial | | |
| | | (Month | n/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) | | 5) | Owned | Indirect (I) | Ownership | | | |
| | | | | | | | | Following | (Instr. 4) | (Instr. 4) | |
| | | | | | | (A) | | Reported | | | |
| | | | | | | or | | Transaction(s) | | | |
| | | | | Code V | Amount | (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 05/29/2014 | | | A | 3,500 | A | \$0 | 56,779 | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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(9-02)

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) | ve Conversion or Exercise | 3. Transaction Date (Month/Day/Year) | 4. Transact Code (Instr. 8) | 5. orNumber of Derivativ Securitie Acquired (A) or Disposed of (D) (Instr. 3, | | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr | |
|--|---------------------------|---|--------------------------------------|---|--|--------------------|---|--|---|--|
| | | | Code V | 4, and 5) (A) (D) | | Expiration Date | 0 N 0 | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | |
| CICCONI JAMES W | | | | | | | |
| 100 N. STANTON | X | | | | | | |
| EL PASO, TX 79901 | | | | | | | |

Signatures

/s/Norma J. Ayoub, attorney-in-fact for James W. Cicconi 05/30/2014

**Signature of Reporting 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).

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.

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