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NORTHEAST UTILITIES

Form 4

February 25, 2014

FORM 4				OMB AP	PROVAL
_	UNITED STATES	S SECURITIES AND EXCHANGE (Washington, D.C. 20549	COMMISSION	OMB Number:	3235-0287
Check this box if no longer	STATEMENT O	F CHANGES IN BENEFICIAL OW	NERSHIP OF	Expires:	January 31, 2005
subject to Section 16. Form 4 or	section 16. SECURITIES				
Form 5	response	0.5			
(Print or Type Respon	ses)				
1. Name and Address Olivier Leon J	of Reporting Person *	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of l Issuer	Reporting Perso	on(s) to
(Last) (F	First) (Middle)	NORTHEAST UTILITIES [NU]	(Check	all applicable)	
· · ·	, , , , , , , , , , , , , , , , , , ,	3. Date of Earliest Transaction (Month/Day/Year)	Director		Owner
C/O NORTHEAS PROSPECT STR	ET UTILITIES, 56 EET	02/21/2014	_X_ Officer (give below) Executive	below) ve VP and COO	
(S	treet)	4. If Amendment, Date Original	6. Individual or Joi	int/Group Filing	g(Check
		Filed(Month/Day/Year)	Applicable Line)		

HARTFOR	D, CT 06103				Form filed by M Person	More than One Re	porting
(City)	(State)	(Zip) Tabl	e I - Non-D	erivative Securities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				(A)	Reported Transaction(s)		

		Code	V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)	
Common Shares, \$5.00 par value	02/21/2014	F		1,510 (1)	D	\$ 44.97	159,523 (2)	D
Common								

By 401(k) Shares, 3,077 Ι Plan \$5.00 par Trustee value

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

X Form filed by One Reporting Person

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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 of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title and A		
Derivative	Conversion	(Month/Day/Year)		TransactionNumber Expiration Date		Underlying Securities		Derivative		
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			(Instr. 3 and	4)	Security (Instr. 5)
				Code V	' (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Shares	(3)					(3)	(3)	Common Shares, \$5.00 par value	3,632 (3)	

Reporting Owners

Director 10% Owner Officer Other

Olivier Leon J

C/O NORTHEAST UTILITIES Executive **56 PROSPECT STREET** VP and COO HARTFORD, CT 06103

Signatures

/s/ Kerry J. Tomasevich, attorney-in-fact for Mr. 02/25/2014 Olivier

> **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).
- (1) Disposition of restricted share units to satisfy tax withholding obligations upon settlement.
- (2) Includes restricted share units and dividend equivalents thereon.

Reporting Person's deferred compensation under the Northeast Utilities Deferred Compensation Plan for Executives, a non-qualified deferred compensation plan, that is nominally invested as common shares. Each phantom share represents the right to receive the cash value of one NU common share upon a distribution event, following vesting. Additional phantom shares are issued upon the automatic reinvestment of dividend-equivalents exempt from line item reporting under SEC Rule 16a-11.

Reporting Owners 2

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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.