### SOUTHWEST GAS CORP

Form 4 June 02, 2006

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * Palacios Christina A			2. Issuer Name <b>and</b> Ticker or Trading Symbol SOUTHWEST GAS CORP [SWX]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	· · · · · · · · · · · · · · · · · · ·			
			(Month/Day/Year)	Director 10% Owner			
5241 SPRING MOUNTAIN ROAD (Street)			06/01/2006	X Officer (give title Other (specify below) Sr. Vice Pres./Central AZ			
			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person			
LAS VEGAS, NV 891500002				Form filed by More than One Reporting Person			

	(City)	(State) (	Zip) Table	I - Non-D	erivative	Secur	rities Acq	uired, Disposed of	, or Beneficiall	y Owned
S	Title of Security Sec	2. Transaction Date (Month/Day/Year)	ion Date 2A. Deemed y/Year) Execution Date, if any (Month/Day/Year)		4. Securities Acquired n(A) or Disposed of (D) (Instr. 3, 4 and 5)  (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Common tock	06/01/2006		Code V $A_{\underline{(1)}}$	Amount 69	(D)	Price \$ 29.54	20,330.13	D	
	Common tock	06/01/2006		A(2)	71	A	\$ 29.54	20,401.13	D	
	Common tock 401k	06/01/2006		A(3)	10	A	\$ 29.54	1,640.8	I	By 401(k)

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

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#### 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	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						`
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	^	of	Number		
						2.1010184010					
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Palacios Christina A 5241 SPRING MOUNTAIN ROAD LAS VEGAS, NV 891500002

Sr. Vice Pres./Central AZ

## **Signatures**

By: Kathy M. 06/02/2006 Bailey, POA

\*\*Signature of Reporting Date
Person

## **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) Pursuant to the stock dividend/dividend reinvestment feature of SWX restricted stock plan, paid dividend on 6/1/06 with a record date of 5/15/06.
- (2) Shares acquired pursuant to the dividend reinvestment plan, dividend paid on 6/1/06 with a record date of 5/15/06.
- (3) Pursuant to the dividend reinvestment feature of the SWX 401(k) plan, dividend paid on 6/1/06.

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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