Edgar Filing: WILLIAMS COMPANIES INC - Form 4/A

WILLIAMS Form 4/A October 21,	S COMPANIES II 2015	NC	J								
FORM			CECU					COMMISSIO	ΛT	PPROVAL	
	UNITED	SIAIES		shington			GE	COMMISSIO	Number:	3235-0287	
if no lor subject Section Form 4 Form 5 obligation may con	Check this box if no longer subject toSTATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16.Expires:January 3 20Section 16. Form 4 or Form 5 obligations may continue. See InstructionStatement of the Securities Exchange Act of 1934, 30(h) of the Investment Company Act of 1940Expires:20									urs per	
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> IZZO RALPH			2. Issuer Name and Ticker or Trading Symbol WILLIAMS COMPANIES INC [WMB]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Me				of Earliest T Day/Year) 2015	ransaction			Officer (give titleOther (specify below) below)			
Filed(M			Filed(Mo	l(Month/Day/Year) Applicable Line 06/2015 _X_ Form filed					Joint/Group Filing(Check One Reporting Person More than One Reporting		
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securiti	ies A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any (Month/Da	ed Date, if ny/Year)	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4 Amount	ies (A) or of (D) 4 and 5) (A) or (D) P	rice	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	
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	Perso	ns who nation o	o res conta	r indirectly. pond to the colle ained in this form	n are not	SEC 1474 (9-02)	

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 of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration Date	Underlying Securities	Derivati
Security	or Exercise		any	Code	of	(Month/Day/Year)	(Instr. 3 and 4)	Security

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)		or osed)) r. 3,					(Instr. 5
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(1)</u>	09/30/2015		J <u>(2)</u>	v	46		(3)	(3)	Common Stock	46	\$ 0
Restricted Stock Units	<u>(1)</u>	09/30/2015		J <u>(4)</u>	v		46	(3)	<u>(3)</u>	Common Stock	46	\$ 0

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips					
Reporting Owner Maine / Mainess	Director	10% Owner	Officer	Other				
IZZO RALPH ONE WILLIAMS CENTER TULSA, OK 74172	Х							
Signatures								
Cher S. Lawrence, Attorney-in-Fact for Mr. Ralph Izzo				10/21/2015				
**Signature of Reporting Person				Date				
Explanation of Responses:								
* If the form is filed by more than one reporting person, <i>see</i> Instruction 4(b)(v).								
** Intentional misstatements or omis	* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).							

(1) Restricted stock units convert into common stock on a one-for-one basis.

(2) Represents additional restricted stock units acquired from dividend reinvestment on restricted stock units.

(3) Reporting Person elected that the restricted stock units will be paid out in common stock at retirement.

(4) This amended Form 4 is being filed to correct a prematurely executed reinvestment on reporting person's 2015 Restricted Stock Unit grant.

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.