**RAU JOHN** Form 3

December 13, 2011

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

**OMB APPROVAL** 

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**SECURITIES** 

(Print or Type Responses)

1. Name and Address of Reporting Person \*

RAU JOHN

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

12/09/2011

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

AGL RESOURCES INC [AGL]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

TEN PEACHTREE PLACE

(Street)

(Check all applicable)

(give title below) (specify below)

6. Individual or Joint/Group 10% Owner

Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Person

Form filed by More than One

Reporting Person

4. Nature of Indirect Beneficial

ATLANTA, GAÂ 30309

(City) (State)

1. Title of Security

(Instr. 4)

(Zip)

Table I - Non-Derivative Securities Beneficially Owned

\_X\_ Director

Officer

2. Amount of Securities Beneficially Owned

(Instr. 4)

Ownership Form:

Other

Ownership

(Instr. 5) Direct (D) or Indirect

(I) (Instr. 5)

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security

(Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

4. Conversion or Exercise Price of

Derivative

Security

5. Ownership Form of Derivative Security:

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Expiration Date Exercisable Date

Title

Amount or Number of Shares

or Indirect (I) (Instr. 5)

Direct (D)

1

## **Reporting Owners**

Reporting Owner Name / Address Director 10% Owner Officer Other

RAU JOHN
TEN PEACHTREE PLACE Â X Â Â Â

ATLANTA, GAÂ 30309

## **Signatures**

Barbara P. Christopher, by power of attorney 12/13/2011

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

No securities are beneficially owned

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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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