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LOFTIN NANCY Form 4	Ϋ́C									
December 15, 200									PPROVAL	
FORM 4	UNITED	STATES					COMMISSIO		3235-0	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	subject to Section 16. Form 4 or Form 5 obligations may continue. See InstructionSTATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESStatement of Changes in Beneficial Ownership of SECURITIESFiled 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							Expires: Estimated burden hou response	urs per	
(Print or Type Respondence)	nses)									
1. Name and Address of Reporting Person <u>*</u> LOFTIN NANCY C			2. Issuer Name and Ticker or Trading Symbol PINNACLE WEST CAPITAL CORP [PNW]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(M			3. Date of Earliest Transaction (Month/Day/Year) 12/13/2006			Director 10% Owner X Officer (give title Other (specify below) below) V.P., General Counsel & Secy				
PHOENIX, AZ 8		4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 					
(City) ((State)	(Zip)	Tab	le I - Non-l	Derivative	e Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
	ansaction Date th/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or l of (D) 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 o Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report on	a separate line	e for each cla	ass of sec	urities bene	Perse infor requi	ons who res mation cont red to resp ays a curre	or indirectly. spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

 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. Number	6. Date Exercisable and	7. Title and Amount of	8. Pri
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onof Derivative	Expiration Date	Underlying Securities	Deriv
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8		Acquire (A) or Dispose (D) (Instr. 3, and 5)	d of					(Inst
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Retention Units	(1)	12/13/2006		А		3,005		(2)	(2)	Common Stock	3,005	5

Reporting Owners

Reporting Owner Name / Addre	ess							
	Director	10% Owner	Officer	Other				
LOFTIN NANCY C 400 N. 5TH STREET PHOENIX, AZ 85004			V.P., General Counsel & Secy					
Signatures								
/s/ Nancy C. Loftin	12/15/2006							

<u>**</u>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) Each retention unit represents a right to receive cash in an amount equal to the fair market value of one share of common stock on the date the retention unit vests.

The retention units vest and will be settled in four equal annual installments beginning January 2, 2007, and thereafter on the first(2) business day of 2008, 2009 and 2010, provided that the recipient continues to be employed by the Company or any of its subsidiaries on the date of vesting or in the event of the recipient's death, disability or retirement.

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.