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ENTERGY CORP /DE/

| Form 4 | | | | | | | | | | | |
|--|--|--|--|--------------------|-----------|--|----------------|---|--|--|---|
| September 04 | , 2014 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | OMB APPROVAL | | | |
| | UNITED S | TATES S | | ITIES A | | | | NGE (| COMMISSION | OMB Number: | 3235-0287 |
| Check this if no longe | ar | | | | | | | | | Expires: | January 31, |
| subject to Section 16 Form 4 or | | F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | | Expires: 2005 Estimated average burden hours per response 0.5 | | |
| Form 5 obligation may conti <i>See</i> Instru- 1(b). | s Section 17(a) | | blic Uti | lity Hol | ldi | ng Com | pany | Act o | ge Act of 1934, f 1935 or Sectio 40 | n | |
| (Print or Type R | esponses) | | | | | | | | | | |
| 1. Name and Ad Tauzin W J | S | 2. Issuer Name and Ticker or Trading Symbol ENTERGY CORP /DE/ [ETR] | | | | | g | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | | | | - | LIKJ | | (Chec | ck all applicable | e) |
| LEGAL DEI | (First) (Mi GY CORPORAT PARTMENT, 639 VENUE, 26TH F | ION (1 | . Date of 1 Month/Da 9/02/20 | y/Year) | Fran | isaction | | | X_ Director Officer (give below) | | 9 Owner er (specify |
| | (Street) | | 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 | | | |
| NEW ORLE | ANS, LA 70113 | | | | | | | | Form filed by M Person | | |
| (City) | (State) (Z | Zip) | Table | I - Non-l | Der | rivative S | lecuri | ties Ac | quired, Disposed o | f, or Beneficial | lly Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deeme Execution any (Month/Da | Date, if | Code (Instr. 8) | tior) | 4. Securit Acquired Disposed (Instr. 3, Amount | (A) o of (D |) | 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 Stock | 09/02/2014 | | | A <u>(1)</u> | | 148 | A | \$ 0 | 5,523 | D | |

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

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 3. Transaction Date 3A. Deemed 6. Date Exercisable and 7. Title and 8. Price of 9. Nt 2. 4. 5. Derivative Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber Expiration Date Amount of Deriv Security or Exercise any Code of (Month/Day/Year) Underlying Security Secu Price of (Month/Day/Year) (Instr. 8) Securities (Instr. 5) (Instr. 3) Derivative Bene (Instr. 3 and 4) Derivative Securities Own Security Acquired Follo (A) or Repo Disposed Trans of (D) (Insti (Instr. 3, 4, and 5) Amount or Date Expiration Title Number Exercisable Date of Code V (A) (D) Shares **Reporting Owners** Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other

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Tauzin W J C/O ENTERGY CORPORATION LEGAL DEPARTMENT Х 639 LOYOLA AVENUE, 26TH FLOOR NEW ORLEANS, LA 70113 Signatures

| /s/ Daniel T. Falstad by power of attorney | 09/04/2014 | | |
|--|------------|--|--|
| **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) Acquired under Entergy Corporation's 2011 Equity Ownership Plan.

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.