Edgar Filing: JOHNSON THOMAS H - Form 4

JOHNSON T	HOMAS H							
Form 4	2012							
December 18								
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMIS Washington, D.C. 20549				COMMISSION	OMB AF OMB Number:	PROVAL 3235-0287		
Check thi if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	er STATEM 5. Filed purs ¹⁸ Section 17(a	IENT OF CHA	NGES IN SECUR 16(a) of th Utility Hold	BENEFIC ITIES e Securitie ling Comp	CIAL OW es Exchang bany Act of	e Act of 1934, f 1935 or Sectior	Expires: Estimated a burden hour response	•
(Print or Type R	esponses)							
1. Name and A JOHNSON	ddress of Reporting I ΓΗΟΜΑS Η	Symbo	uer Name and l n Energy, I		-	5. Relationship of Issuer		
(Last)	(First) (N		of Earliest Tr		'	(Check	k all applicable)
1000 MAIN	STREET		/Day/Year)			X Director Officer (give t below)		Owner er (specify
			nendment, Da Ionth/Day/Year	-		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
HOUSTON,	TX 77002					Form filed by M Person		
(City)	(State)	(Zip) Ta	ble I - Non-D	erivative So	ecurities Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Yea	Code	4. Securitie on(A) or Disp (Instr. 3, 4		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
			Code V	Amount	or (D) Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	12/14/2012		D	117,949	D (1)	0	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day,	ate	7. Title and A Underlying S (Instr. 3 and	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options	\$ 8.7	12/14/2012		D	14,381	(2)	01/13/2016	Common Stock	14,381
Stock Options	\$ 8.6	12/14/2012		D	14,540	(3)	05/10/2016	Common Stock	14,540

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
JOHNSON THOMAS H 1000 MAIN STREET HOUSTON, TX 77002	Х					
Signatures						
/s/ Thomas H.						

Johnson	12/18/2012			
**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).

The reporting person disposed of these shares in connection with the merger (the "Merger") involving GenOn Energy, Inc. and NRG

- (1) Energy, Inc.("NRG") in exchange for shares of NRG common stock, based on the exchange ratio of 0.1216 and having a market value of \$23.00 per share on the effective date of the Merger, plus cash consideration for fractional shares.
- (2) Upon completion of the Merger, this fully-vested option was converted into an option to purchase 1,748 shares of NRG common stock at \$71.55 per share.
- (3) Upon completion of the Merger, this fully-vested option was converted into an option to purchase 1,768 shares of NRG common stock at \$70.73 per share.

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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