Edgar Filing: SIZEMORE CAROLYN T - Form 4

SIZEMORI Form 4 January 26,	E CAROLYN T 2011											
FORM	ЛЛ										PROVAL	
	UNITED	STATES		RITIES				COMMISSIC	Olvin	3 1ber:	3235-028	37
Check t if no lor subject Section Form 4 Form 5	nger to STATE 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,									ated average n hours per	
obligati may con <i>See</i> Inst 1(b).	ons ntinue. Section 17	(a) of the I	Public I		olding Co	ompa	ny Act	of 1935 or Sec				
(Print or Type	Responses)											
	Address of Reporting E CAROLYN T	Person <u>*</u>	Symbol			or Tra	lding	5. Relationshij Issuer	o of Repor	ting Pers	on(s) to	
				CSX CORP [CSX]				(Check all applicable)				
				Date of Earliest Transaction Ionth/Day/Year) I/24/2011				Director 10% Owner X Officer (give title Other (specify below) below) VP and Controller				
LACKSON	(Street)	n		nendment, l ionth/Day/Ye	-	nal		6. Individual of Applicable Line _X_ Form filed Form filed b) by One Rep	orting Per	rson	
	IVILLE, FL 3220							Person				
(City)	(State)	(Zip)	Ta	ble I - Non	-Derivativ	ve Sec	urities A	cquired, Dispose	d of, or Be	eneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Day	Date, if		(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownershi Form: Direct (D or Indirec (I) (Instr. 4)	ip Indi Owr) (Inst	ature of rect Beneficia nership r. 4)	al
Common Stock	01/24/2011			A	3,181 (1)	A	\$ 67.71	16,247	D			
Common Stock	01/24/2011			F	893 <u>(2)</u>	D	\$ 67.71	15,354	D			
Common Stock								14,655	Ι	Size	e Carolyn T emore ing Trust <u>(</u>	
Common Stock								16,219	I	Def	ecutive Ferred npensation n (4)	1

Edgar Filing: SIZEMORE CAROLYN T - Form 4

Common			CSX
Common	2,224	Ι	Corporation
Stock	,		401(k) Plan (5)
			· /

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 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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SIZEMORE CAROLYN T CSX CORPORATION 500 WATER STREET JACKSONVILLE, FL 32202			VP and Controller					
Signatures								
/s/ Mark D. Austin, Attorney-in-Fact		01/26/201	1					
<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) Shares awarded pursuant to the CSX 2008 - 2010 Long Term Incentive Plan ("LTIP").

(2) Withholding of stock to satisfy tax withholding obligation.

Edgar Filing: SIZEMORE CAROLYN T - Form 4

- (3) By Carolyn T. Sizemore, Trustee.
- (4) By Trustee, CSX Corporation Executive Deferred Compensation Plan.
- (5) By Trustee, CSX Corporation Savings Thrift Plan. Reflects equivalent shares of cash value held in CSX Stock Fund, which amounts will fluctuate dependent upon daily net asset value of the fund.

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.