Edgar Filing: Duke Energy CORP - Form 4

| Duke Energy Form 4 July 09, 201 | | | | | | | | | | |
|--|---|--|---|--|---|--|--|--|---|--|
| FORM | | STATES | | | | | E COMMISSIO | | PPROVAL | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Form 5 obligations | | | | | | | | Estimated burden hou response | urs per | |
| 1(b). (Print or Type | Responses) | | | | | | | | | |
| 1. Name and Address of Reporting Person <u></u> DIMICCO DANIEL R | | | 2. Issuer Name and Ticker or Trading Symbol Duke Energy CORP [DUK] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) (First) (Middle) 550 S. TRYON STREET | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/07/2015 | | | | (Check all applicable) <u>X</u> Director Officer (give title 10% Owner below) below) | | | |
| | | 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 | | | | | |
| | TE, NC 28202 | (77:) | | | | | Person | | 1 0 | |
| (City) | (State) | (Zip) | Tab | ole I - Non-l | | | Acquired, Disposed | | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemo Execution any (Month/Da | Date, if | 3. Transactio Code (Instr. 8) Code V | 4. Securit nAcquired Disposed (Instr. 3, 4 Amount | (A) or 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) | |
| Reminder: Rej | port on a separate line | e for each cl | ass of sec | urities bene | Perso inforn requir | ns who rest nation cont ed to resp ys 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. Price |
|-------------|-------------|---------------------|--------------------|------------|------------|-------------------------|------------------------|-----------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transactio | onof | Expiration Date | Underlying Securities | Derivat |
| Security | or Exercise | | any | Code | Derivative | (Month/Day/Year) | (Instr. 3 and 4) | Securit |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Securities | | | (Instr. : |

| | Derivative Security | | | (, [0 () | Acquin (A) or Dispos of (D) (Instr. and 5) | sed 3, 4, | | | | | |
|--|------------------------|------------|--------|--------------------|---|--------------|---------------------|--------------------|-----------------|--|--------|
| | | | Code N | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Director Savings Plan Restricted Stock Unit Deferrals | Ш | 07/07/2015 | A | 2 | 491 | | <u>(2)</u> | <u>(3)</u> | Common Stock | 491 | \$ 75. |

Reporting Owners

| Reporting Owner Name / Address | | Relationsh | | |
|--|-----------|------------|------------|-------|
| | Director | 10% Owner | Officer | Other |
| DIMICCO DANIEL R 550 S. TRYON STREET CHARLOTTE, NC 28202 | Х | | | |
| Signatures | | | | |
| /s/ David S. Maltz, attorney-in- DiMicco | Daniel R. | | 07/07/2015 | |
| **Signature of Reporting | | | 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) Converts to Common Stock on a 1-for-1 basis.
- (2) Generally payable upon reporting person's termination of service.
- (3) Expiration date not applicable.

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.