Edgar Filing: NOGALES LUIS G - Form 4

NOGALES Form 4	LUIS G									
April 29, 20	013									
FORM	ЛД								PPROVAL	
	UNITED	STATES		RITIES A shington			E COMMISSIO	N OMB Number:	3235-028	7
Check t if no lor subject Section Form 4 Form 5 obligati may cor <i>See</i> Inst	Section Public U	NGES IN SECUI 16(a) of th Jtility Hol nvestment	RITIES ne Securi ding Cor	Estimated burden hou response	Estimated average burden hours per response 0.5					
1(b).										
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> NOGALES LUIS G			2. Issue Symbol	er Name an o	d Ticker or	Trading	5. Relationship of Reporting Person(s) to Issuer] (Check all applicable)			
			EDISC	ON INTER	RNATIO	NAL [EIX				
(Last) (First) (Middle) 2244 WALNUT GROVE AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 04/25/2013			XDirector10% Owner Officer (give titleOther (specify below)below)				
ROSEMEA	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)								
(City)	``´			ole I - Non-l	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(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: Re	port on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly	or indirectly.			
					Perso inform requir	ns who res nation con red to resp ays a curre	spond to the collect 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. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deriva
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Securi
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired			(Instr.

	Derivative Security				 (A) or Disposed of (D) (Instr. 3, 4, and 5) 						
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	<u>(1)</u>	04/25/2013	А		2,069 (2)		(3)	(3)	Common Stock	2,069	\$

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
NOGALES LUIS G 2244 WALNUT GROVE AVENUE ROSEMEAD, CA 91770	Х						
Signatures							
/s/ Marga Rosso, attorney-in-fact for D Nogales	04/29/2013						

**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) 1 for 1: Each phantom stock unit, also called a deferred stock unit, is equal in value to one share of Edison International Common Stock.
- (2) The phantom stock units were granted to the Reporting Person upon re-election as a director at the Issuer's annual meeting.
- (3) The phantom stock units are to be settled upon the Reporting Person's retirement, resignation, death or disability, unless another date(s) is elected by the Reporting Person.
- (4) Includes additional phantom stock units acquired pursuant to dividend reinvestment and exempt from reporting under Section 16(a).

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.