Poferl Judy M.

Form 3

| FORM | FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | OMB | | |
|---|--|--------------------------|---|--|--|----------------------------|---|--|
| | Fi | led pursuantion 17(a) of | STATEMENT OF BEN SECURI t to Section 16(a) of the the Public Utility Holdi 0(h) of the Investment C | IEFICIAL TIES Securities H ng Compan | Exchange Ac y Act of 193 | t of 19 | Number: 3235-0102 F Expires: January 31 2005 Estimated average burden hours per 34, response 0.5 | |
| (Print or Type | Responses) | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Poferl Judy M. | | Charles and | | Name and Ticker or Trading Symbol ENERGY INC [XEL] | | | | |
| (Last) | (First) | (Middle) | 08/26/2009 | 4. Relationsl Person(s) to | · · · · | | 5. If Amendment, Date Original Filed(Month/Day/Year) | |
| 414 NICOL | LET MAL | L | | 1 010011(0) 00 | 100001 | | rneu(Monul/Day/rear) | |
| (Street) | | | (Check all applicable) | | 5. Individual or Joint/Group | | | |
| MINNEAP | OLIS, M | NÂ 55401 | | | | ow) | Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | |
| (City) | (State) | (Zip) | Table I - N | le I - Non-Derivative Securities Beneficially Owned | | | | |
| 1.Title of Sect (Instr. 4) | ırity | | 2. Amount o Beneficially (Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nat Owner (Instr. | | |
| Common S | tock | | 179.697 | | D | Â | | |
| Common Stock | | | 2,803.639 | 2,803.639 | | 401K | | |
| Reminder: Rep owned directly | | | ach class of securities benefic | ially | SEC 1473 (7-02 | 2) | | |
| | infor | mation conta | pond to the collection of ained in this form are not and unless the form displ | t | | | | |

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

currently valid OMB control number.

| 1. Title of Derivative Security | 2. Date Exercisable and | 3. Title and Amount of | 4. | 5. | 6. Nature of Indirect |
|---------------------------------|-------------------------|------------------------|-------------|------------|-----------------------|
| (Instr. 4) | Expiration Date | Securities Underlying | Conversion | Ownership | Beneficial Ownership |
| | (Month/Day/Year) | Derivative Security | or Exercise | Form of | (Instr. 5) |
| | | (Instr. 4) | Price of | Derivative | |
| | | | Derivative | Security: | |

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| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Security | Direct (D) or Indirect (I) (Instr. 5) | |
|----------------------|---------------------|--------------------|-----------------|----------------------------------|------------|--|---|
| Option, right to buy | (1) | 12/12/2010 | Common Stock | 4,600 | \$ 27.9375 | D | Â |
| Option, right to buy | (1) | 12/12/2011 | Common Stock | 7,800 | \$ 25.9 | D | Â |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|------------------------------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Poferl Judy M. 414 NICOLLET MALL MINNEAPOLIS, MN 55401 | Â | Â | President & CEO, NSPMN | Â | | |
| Signatures | | | | | | |
| Tara M. Heine, Attorney-in-Fact for Poferl | 09/01/2009 | | | | | |
| **Signature of Reporting Person | Date | | | | | |
| Explanation of Responses: | | | | | | |

n oi nesponses.

* If the form is filed by more than one reporting person, see Instruction 5(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).
- Option Grant exercisable dates are based on a vesting schedule of a pro-rated portion of each grant, which is unique to, and dictated by (1) the plan under which the specific option grant was authorized.

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.