

DELTA AIR LINES INC /DE/
Form 3/A
October 31, 2014

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Â Smith Joanne D</p> <p>(Last) (First) (Middle)</p> <p>C/O DELTA AIR LINES, INC., Â P.O. BOX 20574, DEPT. 981</p> <p>(Street)</p> <p>ATLANTA, Â GA Â 30320</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>10/01/2014</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>DELTA AIR LINES INC /DE/ [DAL]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) EVP & Chief HR Officer</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p> <p>10/01/2014</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person</p>
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Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	60,884 ⁽¹⁾ ⁽²⁾	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Employee Stock Option (Right to Buy) ⁽²⁾	Â ⁽³⁾	04/29/2017	Common Stock	23,000	\$ 18.84	D	Â
Employee Stock Option (Right to Buy) ⁽²⁾	Â ⁽³⁾	10/28/2018	Common Stock	80,000	\$ 7.99	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Smith Joanne D C/O DELTA AIR LINES, INC. P.O. BOX 20574, DEPT. 981 ATLANTA, GA 30320	Â	Â	Â EVP & Chief HR Officer	Â

Signatures

/s/ Jan M. Davidson as attorney-in-fact for Joanne D. Smith 10/31/2014

Signature of Reporting Person

Date

Explanation of Responses:

* 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).

- The 60,884 common shares reported include 54,326 shares of restricted common stock. Of those restricted shares, (i) 20,190 were granted to the Reporting Person on February 7, 2013 and will vest on February 1, 2015, (ii) 17,946 were granted to the Reporting Person on
- (1) February 7, 2013 and will vest 50% on February 1, 2015 and 50% on February 1, 2016, and (iii) 16,190 were granted to the Reporting Person on February 6, 2014 and will vest in three equal annual installments on February 1, 2015, 2016 and 2017. The original Form 3 incorrectly reported the initial Amount of Securities Beneficially Owned by the Reporting Person on the Date of Event.
 - (2) The grant of the restricted stock and option awards were approved by the Personnel & Compensation Committee of Delta's Board of Directors and are exempt from Section 16(b) of the Securities Exchange Act of 1934 under Rule 16b-3(d).
 - (3) All options are currently exercisable.

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.