#### LOWRIE WILLIAM G

Check this box

Form 4 April 01, 2009

### FORM 4

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

if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See Instruction

1(b).

STATEMENT OF CHANGES IN 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)

1. Name and Address of Reporting Person \*

LOWRIE WILLIAM G

(Zip)

(Last) (First)

(Middle)

44 GOAT ISLAND PLACE

(Street)

(State)

2. Issuer Name and Ticker or Trading

[WMB]

4. If Amendment, Date Original

Filed(Month/Day/Year)

3.

SHELDON, SC 29941

Symbol

WILLIAMS COMPANIES INC

3. Date of Earliest Transaction

(Month/Day/Year) 03/30/2009

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 5. Amount of

2. Transaction Date 2A. Deemed 1.Title of Security (Month/Day/Year) (Instr. 3)

(City)

Execution Date, if (Month/Day/Year)

TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

4. Securities

Following Reported (A) Transaction(s) or (Instr. 3 and 4)

Code V Amount (D) Price

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 Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if

any

4. Transactionof Code

5. Number 6. Date Exercisable and **Expiration Date** Derivative (Month/Day/Year)

7. Title and Amount of 8. Price **Underlying Securities** (Instr. 3 and 4)

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

6. Individual or Joint/Group Filing(Check

6. Ownership

Form: Direct

(D) or Indirect Beneficial

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

(I)

(Instr. 4)

(Check all applicable)

10% Owner

Other (specify

7. Nature of

Ownership

(Instr. 4)

SEC 1474

(9-02)

Indirect

Issuer

below)

Person

Securities

Owned

Beneficially

X\_ Director

Applicable Line)

Officer (give title

Estimated average

burden hours per

Deriva Securit

#### Edgar Filing: LOWRIE WILLIAM G - Form 4

(Instr. 3)	Price of Derivative Security	(Month/Day/Yea	(Month/Day/Year)	(Instr.	8)	Secur Acqui (A) or Dispo of (D) (Instr. and 5)	ired r osed ) . 3, 4,					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	\$ 11.07	03/30/2009		J <u>(1)</u>		233		(2)	(2)	Common Stock	233	\$ 11.

# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
LOWRIE WILLIAM G 44 GOAT ISLAND PLACE SHELDON, SC 29941	X							

# **Signatures**

Cher S. Lawrence, Attorney-in-Fact for Mr. William G.
Lowrie

04/01/2009

\*\*Signature of Reporting Person

# **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) Represents shares acquired from dividend reinvestment on restricted stock units, formerly referred to as deferred stock, for a dividend paid on March 30, 2009.

Date

(2) Restricted stock units that will be paid out in common stock at various dates in the future.

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.

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