ONE Gas, Inc	с.										
Form 4											
February 25,											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB										PROVAL	
	UNITE	DSIAIL		shington,			NGE C	.01011011551010	OMB Number:	3235-0287	
Check this			· · · ct.	5111150011,	<b>D.C. 2</b> 0	017			Expires:	January 31,	
if no longer subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNE				NERSHIP OF	•	2005	
Section 16.				SECURITIES					Estimated average burden hours per		
Form 4 or									response	0.5	
Form 5 obligation	- ·	-					-	e Act of 1934,			
may contin	nue. Section			vestment	•	· ·	•	f 1935 or Section	n		
See Instruction 1(b).	ction	50(II)	) of the m	ivestinent	Compan	ly At	101194	FO			
1(0).											
(Print or Type R	esponses)										
	ddress of Report	-		er Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
RODRIGUE	Z EDUARDO	JA	Symbol								
ONE G			Gas, Inc. [OGS]				(Check all applicable)				
(Last)	(First)	(Middle)		f Earliest Tr	ansaction			V D'	100	0	
(Month/D 15 E. 5TH STREET 02/23/20			-				_X_Director10% Owner Officer (give titleOther (specify				
15 E. 5111 STREET (02/25/20			015				below) below)				
			endment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mon				nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
TULSA, OK 74103				Form filed by M				Aore than One Reporting			
								Person			
(City)	(State)	(Zip)	Tabl	le I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction I			3.	4. Securi			5. Amount of	6. Ownership		
Security (Month/Day/Year) Execution Date, if (Instr. 3) any (Month/Day/Year)			on Date, if	ate, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially	Form: Direct Indirect (D) or Beneficia	Indirect Beneficial	
			(Instr. 8)				Owned		Ownership		
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common				Coue v	Amount	(D)	+ 1 HCC				
stock, par	02/23/2015			A <u>(1)</u>	788	А	\$	7,877	D		
value \$0.01							42.69				

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)

## Edgar Filing: ONE Gas, Inc. - Form 4

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transacti	5. onNumber	6. Date Exerce Expiration D		7. Tit Amou	le and unt of	8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	( · · · · · · · · · · · · · · · · · · ·	any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/ e		Underlying Securities (Instr. 3 and 4)		(Instr. 5) Ber Ow Fol Rep Tra	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
RODRIGUEZ EDUARDO A							
15 E. 5TH STREET	Х						
TULSA, OK 74103							
Signatures							

/s/ Brian K. Shore, Attorney-in-Fact for Eduardo A. Rodriguez

\*\*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) Annual stock retainer shares are issued under ONE Gas' Equity Compensation Plan.

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.

02/25/2015

Date