Edgar Filing: Jacobson Douglas J - Form 4/A

Jacobson Dou	ıglas J									
Form 4/A March 16, 20	09									
FORM	4 UNITED	STATES		ITIES Al hington, 1			COMMISSION		PPROVAL 3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Section 16. Form 4 or Form 5 Section 17(a) of the Public Utility Holding Company Act of 1933 30(h) of the Investment Company Act of 1940						ge Act of 1934, of 1935 or Sectio	burden hou response	Estimated average burden hours per response 0.8		
(Print or Type R	esponses)									
1. Name and Address of Reporting Person [*] Jacobson Douglas J			2. Issuer Name and Ticker or Trading Symbol CHESAPEAKE ENERGY CORP [CHK]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 6100 NORTH WESTERN AVENUE (Street)			 3. Date of Earliest Transaction (Month/Day/Year) 03/06/2009 4. If Amendment, Date Original Filed(Month/Day/Year) 03/10/2009 				Director 10% Owner X Officer (give title Other (specify below) below) below) Executive Vice President			
							 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
OKLAHOM	A CITY, OK 73	118					Form filed by I Person	More than One Ro	eporting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecurities Ac	quired, Disposed o	of, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execution Execut	med on Date, if Day/Year)	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	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)	
Common Stock				Code V	Amount	(D) Price	552,170 <u>(1)</u>	D		

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	Date	Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Underlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securities	(Instr. 5)	Bene
	Derivative				Securities	1		(Instr. 3 and 4)		Owne
	Security				Acquired					Follo
	•				(A) or					Repo
					Disposed					Trans
					of (D)					(Instr
					(Instr. 3,					
					4, and 5)					
								Amount		
								or		
						Date	Expiration	Title Number		
						Exercisable	Date	of		
				Code V	(A) (D)			Shares		
				Coue v	(\mathbf{A}) (\mathbf{D})			Silates		
Dene	utina A									

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Reporting Owners

Reporting Owner Name / Address			Relationships		
Terforming of their reamer trade one	Director	10% Owner	Officer	Other	
Jacobson Douglas J 6100 NORTH WESTERN AVENUE OKLAHOMA CITY, OK 73118			Executive Vice President		
Signatures					
Amy M. Sanders for Douglas J. Jacobson		03/16/2009			
**Signature of Reporting Person		Date			

<u>**</u>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).

This Form 4 is filed to correct the Form 4 filed on March 10, 2009 which incorrectly reported the withholding of shares to cover Mr.

(1) Jacobson's tax obligation with respect to the vesting of restricted stock. No shares were withheld from Mr. Jacobson's restricted stock vesting.

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.