Edgar Filing: FAIRBAIRN URSULA F - Form 4

	N URSULA F											
Form 4	2 2011											
September 1									OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287			
Check this box				NGES IN BENEFICIAL OWNERSHIP OF				ERSHIP OF	Expires: Estimated a	January 31, 2005 verage		
	Section 16. SECURITIES							burden hours per response 0.5				
Form 5	Filed pu						•	Act of 1934,	•	0.5		
obligatio may cont <i>See</i> Instr 1(b).	tinue. Section 17			tility Hold vestment	•	· ·		1935 or Sectior	1			
(Print or Type]	Responses)											
FAIRBAIRN URSULA F Symbol			ssuer Name and Ticker or Trading ool IOCO INC [SUN]			5. Relationship of Reporting Person(s) to Issuer						
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Chee				ck all applicable)					
(Month/I 1735 MARKET STREET 09/09/2 (Street) 4. If Ame			(Month/I	(Month/Day/Year) 09/09/2011				_X_ Director Officer (give t below)	Officer (give title Other (specify			
			Amendment, Date Original (Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
PHILADEL	LPHIA, PA 1910)3-7583						Form filed by M Person	ore than One Re	porting		
(City)	(State)	(Zip)	Tab	le I - Non-D	Derivative	Secur	ities Acqu	iired, Disposed of,	, or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year		n Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	ispose	d of (D)	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	09/09/2011			J <u>(1)</u>	906	A	\$ 37.257	16,908.676	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	rivative Expiration Date (Month/Day/Year) aquired (A) Disposed of) Istr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Deri Secu (Inst
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Share Units	<u>(2)</u>	09/09/2011	А	36.283	(3)	(3)	Common Stock	36.283	\$ 3'
Phantom Stock	<u>(2)</u>	09/09/2011	А	59.91	(3)	(3)	Common Stock	59.91	\$ 3'

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
FAIRBAIRN URSULA F 1735 MARKET STREET PHILADELPHIA, PA 19103-7583	Х					
Signatures						
/s/ John J. DiRocco, Jr., Attorney-in-Fact		09/13/201	1			
<pre>**Signature of Reporting Person</pre>		Date				

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) Granted pursuant to Rule 16b-3(d)(1).
- (2) Conversion rate is 1 for 1.
- (3) Not Applicable

Total of 9,048.180 Restricted Share Units beneficially owned following reported transaction (20.725 Restricted Share Units under
 (4) Sunoco, Inc.'s Directors' Deferred Compensation Plan I and 15.557 Restricted Share Units under Sunoco, Inc.'s Directors' Deferred Compensation Plan II).

Total of 14,940.291 Phantom Stock Units beneficially owned following reported transaction (45.744 Phantom Stock Units under Sunoco,
 (5) Inc.'s Directors' Deferred Compensation Plan I and 14.166 Phantom Stock Units under Sunoco, Inc.'s Directors' Deferred Compensation Plan II).

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.