Edgar Filing: LTC PROPERTIES INC - Form 4

LTC PROPE	ERTIES INC											
Form 4												
February 13,	2015											
FORM							NCEO			PROVAL		
	UNITED	STATES					NGE C	OMMISSION	OMB Number:	3235-0287		
Check the	is box		vv as	shington,	D.C. 20	549				January 31,		
if no longer STATEMENT OF CHAN				GES IN I	RENEF	ГСТА	LOW	NERSHIP OF	Expires:	2005		
subject to Section 1)			SECUR					Estimated average			
	Section 16. Form 4 or				SECONTIES					burden hours per response 0.5		
Form 5	Filed put	suant to S	Section 1	6(a) of the	e Securit	ies E	xchange	e Act of 1934,		010		
obligation may cont		a) of the	Public U	ility Hold	ling Con	npany	y Act of	1935 or Section	n			
See Instru		30(h)	of the In	vestment	Compan	y Ac	t of 194	0				
1(b).												
(Drint an Tama I)											
(Print or Type I	(esponses)											
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship of							5. Relationship of	Reporting Pers	son(s) to			
SHELLEY-KESSLER PAMELA Symbol				r Name and Ticker or Trading				Issuer				
Symoor				ROPERTIES INC [LTC]								
(Last)	(First) (Middle)	3. Date of Earliest Transaction (Check all applic					k all applicable	:)			
				Day/Year)				Director	10%	Owner		
2829 TOWNSGATE ROAD, SUITE 02/12/20				-				\underline{X} Officer (give title \underline{X} Other (specify				
350								below) below) EVP, CFO & Secretary				
	(Street)		1 If Ama	ndmant Da	ta Oniaina	1				-		
			nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)					
1 neu(won			ab Day, Tear)				_X_ Form filed by One Reporting Person					
WESTLAK					Form filed by More than One Reporting Person							
(City)	(State)	(Zin)										
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Date			3.	4. Securi			5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Year)	Executio any	n Date, if	Transactio Code	n(A) or Di (Instr. 3,			Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(1150.5)		(Month/Day/Year)			(1150.5,	i unu	5)	-	Indirect (I)	Ownership		
				(Instr. 8)				Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common				Coue v	Amount	(D)	Flice			spouse		
Stock								1,000	Ι	IRA		
Common							¢					
Stock	02/12/2015			F <u>(1)</u>	1,992	D	\$ 44.74	100,252	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.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Unde Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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			
SHELLEY-KESSLER PAMELA 2829 TOWNSGATE ROAD SUITE 350 WESTLAKE VILLAGE, CA 91361			EVP, CFO & Secretary				
Signatures							

/s/ Pame	la J	02/13/2015	
Shelley-H	Kessler		02/13/2013
**~•			

**Signature of Reporting Person

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) Represents tax withholding on vesting of previously reported restricted stock grant.

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.