## Edgar Filing: TEJON RANCH CO - Form 4

TEJON RAN	NCH CO											
Form 4												
May 19, 201	6											
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	OMB APPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287		
Check th				8 /					Expires:	January 31,		
if no long	- NIATH	MENT O	F CHAN	GES IN BENEFICIAL OWNERSHIP				NERSHIP OF	. 2			
subject to STATEMENT OF CHAN Section 16. Form 4 or				SECURITIES					Estimated average burden hours per response 0.5			
Form 5		ursuant to	Section 1	6(a) of the	e Securit	ies F	xchang	e Act of 1934,	response	0.5		
obligatio	ns Section 1'						•	1935 or Section	n			
may cont See Instru	linue.			vestment	•	· ·	•					
1(b).	uction	( )			<b>I</b>	5						
(Print or Type I	Responses)											
1. Name and A	Address of Reportin	ng Person <u>*</u>	2. Issuer	Name and	Ticker or	Tradi	ng	5. Relationship of	Reporting Pers	son(s) to		
ATKINSON	N DENNIS		Symbol					Issuer				
			-	RANCH	CO [TR	C]						
(Last)	(First)	(Middle)		Earliest Tr	-	1		(Chec.	k all applicable	:)		
(Last)	(First)	(Midule)			ansaction			Director	10%	Owner		
			nth/Day/Year) 19/2016			Director 10% Owner X Officer (give title Other (specify						
1.0.2011			03/17/20	010				below)	below)			
								Senior Vic	e President- Fa	rming		
(Street) 4. If Ar				mendment, Date Original			6. Individual or Joint/Group Filing(Check					
Filed(Mon				nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
TEIONDA		2						_X_Form filed by C				
TEJON RA	NCH, CA 9324	.3						Person		r8		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Da	ate 2A. Deer	med	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yea	r) Executio	n Date, if	Transaction(A) or Disposed of (D)				Securities	Form: Direct			
(Instr. 3)		any		Code (Instr. 3, 4 and 5) $(1 + 3)$			5)	Beneficially		Beneficial		
		(Month/	Day/Year)	(Instr. 8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
								Reported	(instr. i)	(Insu: I)		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Tejon												
Ranch Co.	05/10/2017			D	500	٨	\$	10 5 1 5	D			
Common	05/19/2016			Р	500	А	19.57	42,545	D			
Stock												

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)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int 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 / Addre	<b>SS</b>	Relationships							
	Director	10% Owner	Officer	Other					
ATKINSON DENNIS P.O. BOX 1000 TEJON RANCH, CA 93243			Senior Vice President- Farming						
Signatures									
/s/ Dennis J. Atkinson	05/19/2016								

\*\*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).

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.