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NASSAU HI Form 4	ENRY N										
April 17, 201	8										
									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Section 16.								Expires:	January 31,		
				GES IN BENEFICIAL OWNERSHIP OF SECURITIES				Estimated average burden hours per			
Form 4 orresponseForm 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or Sectionmay continue.30(h) of the Investment Company Act of 1940									0.5		
(Print or Type R	Responses)										
1. Name and Address of Reporting Person * 2. Issuer Name and Ticker NASSAU HENRY N Symbol BLACKSTONE MORT TRUST, INC. [BXMT]				Ticker or	Tradiı	ng	5. Relationship of Reporting Person(s) to Issuer				
								(Check all applicable)			
	(First) ERT LLP,, CIRA 929 ARCH STF		3. Date of (Month/D 04/16/20	-	ansaction			X Director Officer (give below)		Owner er (specify	
(Street) 4. If Am			4. If Ame	endment, Date Original			6. Individual or Joint/Group Filing(Check				
				nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
PHILADEL	PHIA, PA 1910)4						Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	 Execution any 		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)			Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)			
Class A Common Stock	04/16/2018			А	775 <u>(1)</u>	А	\$ 31.17	45,192	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)

Reporting Owners

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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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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			
NASSAU HENRY N C/O DECHERT LLP, CIRA CENTER, 2929 ARCH STREET PHILADELPHIA, PA 19104	Х						
Signatures							
/s/ Anthony F. Marone, Jr., Attorney-In-Fact	04/17/2018						
**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).

Represents Class A Common Stock Units in lieu of dividends payable on Class A Common Stock Units owned by the Reporting Person, which convert to shares of Class A Common Stock on a one-for-one basis. The number of Class A Common Stock Units was calculated

(1) by dividing (1) the product of the number of Class A Common Stock Units owned by the Reporting Person and the \$0.62 per share dollar amount of the Class A Common Stock dividend paid by the Company on April 16, 2018 by (2) the closing price of the Company's Class A Common Stock on April 16, 2018.

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.