Edgar Filing: City Office REIT, Inc. - Form 4

City Office REI	Г, Inc.											
Form 4 December 29, 20)14											
FORM 4											PPROVAL	
	UNITED	STATES				AND EX , D.C. 20		NGE	COMMISSION	N OMB Number:	3235-0287	
Check this bo if no longer										Expires:	January 31, 2005	
subject to Section 16. Form 4 or	STATEN	ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									average urs per . 0.5	
Form 5 obligations may continue. See Instruction 1(b).	Section 17(a) of the l	Public U	Jtility I	Hol		mpan	y Act	nge Act of 1934, of 1935 or Sectio 940	on		
(Print or Type Respo	onses)											
1. Name and Addre SHRAIBERG S		Person <u>*</u>	Symbol			l Ticker of Γ, Inc. [C		ing	5. Relationship o Issuer			
(Last) (First) (Middle)			3. Date of Earliest Transaction					(Check all applicable)				
9375 RIVIERA HILLS DR.			(Month/Day/Year) 12/23/2014				X_ Director 10% Owner Officer (give title Other (specify below) below)					
GREENWOOD VILLAGE, CO			4. If Am Filed(Mo			ate Origina r)	al		6. Individual or 3 Applicable Line) _X_ Form filed by Form filed by Person		Person	
(City)	(State)	(Zip)	Tal	ole I - No	on-I	Derivative	Secu	rities A	cquired, Disposed o	of, or Beneficia	ally Owned	
	ransaction Date nth/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code		4. Securi nAcquired Disposed (Instr. 3,	(A) o of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	Amount	(D)	Price	(Insu: 5 and 4)			
Reminder: Report o	n a separate line	for each cl	ass of sec	urities b	enef	Perso inforr requi	ons w natio red to ays a	ho res n cont o respo	or indirectly. spond to the colle ained in this form ond unless the for ntly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tab					uired, Dis	sposed		Beneficially Owned securities)	I		

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)						(1
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Operating Partnership Units <u>(1)</u>	<u>(1)</u>	12/23/2014		J <u>(2)</u>			9,854	04/14/2015	<u>(3)</u>	Common Stock, par value \$0.01	9,854	

Reporting Owners

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
SHRAIBERG STEPHEN 9375 RIVIERA HILLS D GREENWOOD VILLAG	R.	Х							
Signatures									
/s/ Stephen Shraiberg	12/29/2014								
**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 common units of limited partnership interest ("OP Units") in City Office REIT Operating Partnership, L.P., a Maryland
(1) limited partnership (the "Operating Partnership"). City Office REIT, Inc., a Maryland corporation (the "Issuer") is the general partner of the Operating Partnership. The OP Units are redeemable, beginning April 14, 2015, for cash equal to the then current-market value of one share of the Issuer's common stock or, at the election of the Issuer, for shares of the Issuer's common stock on a one-for-one basis.

The OP Units were issued on April 14, 2014 at \$12.50 per share pursuant to a contribution agreement with the Issuer and the Operating
Partnership, pursuant to which the Reporting Person contributed his interests in certain entities that directly or indirectly owned properties or interests that were contributed to the Issuer, the Operating Partnership or its subsidiaries.

(3) The OP Units are vested as of the date of issuance. The OP Units have no expiration date.

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.