Edgar Filing: VENTAS INC - Form 4

VENTAS IN	С											
Form 4												
March 23, 20	16											
FORM									OMB AI	PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box				0				Expires:	January 31,			
subject to	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O						NERSHIP OF	•	2005			
Section 10	CECUDIDIEC							Estimated average burden hours per				
Form 4 or	r								response			
Form 5	· · ·							ge Act of 1934,				
obligation may conti		· · ·		•	U	· ·		of 1935 or Section	n			
See Instru		30(h)) of the Inv	vestment	Compan	y Act	t of 19	40				
1(b).												
(Print or Type R	(esponses)											
1 Name and A	ddrass of Dapartir	ng Darson *	. .		T . 1			5 Delationship of	Paparting Dar	aon(s) to		
						Issuer	nip of Reporting Person(s) to					
CROCKER	Symbol		נתתי									
	VENTA	S INC [V	IKJ			(Check all applicable)						
(Last) (First) (Middle)			3. Date of Earliest Transaction									
963 EVERGREEN DRIVE			(Month/D	•				X_ Director10% Owner				
			03/22/2016					Officer (give titleOther (specifybelow)below)				
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
		th/Day/Year	U			Applicable Line)						
			1 1100(11101		/			_X_ Form filed by C	One Reporting Pe	erson		
DELRAY, F	FL 33483							Form filed by M Person	Iore than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ities Ac	quired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction D	Date 2A. Dee						5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yea	·	on Date, if	TransactionAcquired (A) or					Form: Direct			
(Instr. 3)		any	CodeDisposed of (D)h/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially	Indirect (I) Own	Beneficial		
		(Month/						Owned Following		Ownership (Instr. 4)		
								Reported	(IIIsu: +)	(IIIsu: +)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	03/22/2016			A	324 <u>(1)</u>	A A	\$ 0	114,164.486 (2)	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. Transact Code (Instr. 8)	of Deriv Secur Acqu (A) o Dispo of (D	onNumber Expiration Date		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code N	4, and	d 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
CROCKER DOUGLAS II 963 EVERGREEN DRIVE DELRAY, FL 33483	Х							
Signatures								
Douglas Crocker, II, By: T. Rid Attorney-In-Fact		03/23/2016						

**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).

Restricted stock units granted by Issuer pursuant to the Ventas, Inc. 2012 Incentive Plan (the "Incentive Plan"). Such units are payable (1) solely in common stock and subject to the terms and conditions of the director's deferral election and the Incentive Plan. These restricted stock units vest in two equal annual installments beginning on January 1, 2017.

(2) As of March 22, 2016, Reporting Person owns options to purchase an aggregate of 29,700 shares of Issuer's common stock.

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.