Edgar Filing: Fox Jason E. - Form 4

| Fox Jason E Form 4 February 21 FORM Check th if no lon subject t Section | , 2019 1 4 UNITED his box ger o STATEN | Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF | | | | | | OMB APPROVAL OMB 3235-0287 Number: January 31, Expires: January 31, 2005 Estimated average burden hours per | | |
|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|---------------|-----|------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|----------------|--|
| Form 4 c Form 5 obligatic may con <i>See</i> Instr 1(b). | Filed pur ons tinue. Section 17(ruction | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section | | | | | | | | |
| (Print or Type | Responses) | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Fox Jason E. | | | 2. Issuer Name and Ticker or Trading Symbol W. P. Carey Inc. [WPC] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) (1 | | 3. Date of Earliest Transaction | | | | (Check all applicable) | | | |
| C/O W. P. CAREY INC., 50 ROCKEFELLER PLAZA | | | 02/19/2019 | | | | _X_ Director 10% Owner _X_ Officer (give title Other (specify below) CEO | | | |
| | | | fonth/Day/Year) Applicable Line _X_ Form filed | | | | Applicable Line) _X_ Form filed by C Form filed by M | Joint/Group Filing(Check One Reporting Person More than One Reporting | | |
| (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | ly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | 3.4. Securities AcquiredTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. 7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership Indirect (I) (Instr. 4) (Instr. 4) | | | |
| Common | | | Code V | | (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 02/19/2019 | | A <u>(1)</u> | 36,038 (1) | А | \$ 0 <u>(1)</u> | 507,235 | D | | |
| Common Stock | 02/19/2019 | | F | 19,180 | D | \$ 75.19 | 488,055 | D | | |
| Common Stock | | | | | | | 861.6719 | Ι | by son | |
| Common Stock | | | | | | | 62.7999 | Ι | by daughter | |

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)

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. | 6. Date Exer | cisable and | 7. Titl | le and | 8. Price of | 9. Nu |
|------------------------|---------------------------------------------------|---------------------|-------------------------|--------------------|-------------------------|---------------------|--------------------|----------------|------------------------------|------------------------|-----------------------------------------------------------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transact | ionNumber | Expiration D | ate | Amou | int of | Derivative | Deriv |
| Security (Instr. 3) | or Exercise Price of Derivative Security | | any (Month/Day/Year) | Code (Instr. 8) | of | (Month/Day/ e | | Under Secur | rlying | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | | (Instr. 3, 4, and 5) | | | | | | (III)ti |
| | | | | | | Date Exercisable | Expiration Date | Title | Amount or Number of | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|------------------------------------------------------------------------------------|---------------|-----------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Fox Jason E. C/O W. P. CAREY INC. 50 ROCKEFELLER PLAZA NEW YORK, NY 10020 | Х | | CEO | | | | |
| Signatures | | | | | | | |
| /s/ James A. Fitzgerald, Attorney-in-fact | | 02/21/2 | 2019 | | | | |
| **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 the vesting of performance share units granted in February 2016 with a three-year performance cycle.

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.