## Edgar Filing: HCP, INC. - Form 4

HCP, INC.												
Form 4												
September 08	8, 2015											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVA					
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box if no longer									Expires:	January 31		
subject to		IENT OF	F CHAN			ICIA	LOW	NERSHIP OF	Estimated a	2005 Verage		
Section 1		SECURITIES						burden hours per				
Form 4 or									response 0.5			
Form 5 obligation								e Act of 1934,				
may cont								1935 or Section	1			
See Instru 1(b).		30(h)	of the In	vestment	Compan	y Ac	t of 194	-0				
1(0).												
(Print or Type R	Responses)											
1. Name and Address of Reporting Person *2. IssueHoffmann James PSymbol				Name and	Ticker or	Tradii	ng	5. Relationship of Reporting Person(s) to Issuer				
-			-	IC. [HCP	]			(Check all applicable)				
(Last) (First) (Middle) 3. Da			3. Date of	Earliest Tr	ansaction			(Check an applicable)				
1920 MAIN STREET, SUITE 1200 08 (Street) 4.1			(Month/D	(Month/Day/Year)				X Director		Owner		
			08/25/2015					Officer (give titleOther (specify below)				
			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check				
								Applicable Line)				
IRVINE, CA	A 92614							_X_ Form filed by O Form filed by M Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of,	or Beneficial	lv Owned		
1.Title of	2. Transaction Date	24 Deen		3.			_	5. Amount of	6. Ownership	-		
Security	(Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of (D)				Securities	Form: Direct			
(Instr. 3)		any	Code (Instr. 3, 4 and 5)					Beneficially	(D) or	Beneficial		
		(Month/E	Day/Year)	(Instr. 8)				Owned	Indirect (I)	Ownership		
								Following Reported	(Instr. 4)	(Instr. 4)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common	09/05/0015						\$	28,878.194	D			
Stock	08/25/2015			А	502 <u>(1)</u>	A	39.84	<u>(2)</u>	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. Transac Code (Instr. 8	tionNumber H of (		5	ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owna Follo Repo Trans (Instr
			Code V	V (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other Hoffmann James P **1920 MAIN STREET** Х **SUITE 1200** IRVINE, CA 92614 Signatures

/s/ Troy E. McHenry, SVP, Legal and Human Resources (Attorney-In-Fact)

\*\*Signature of Reporting Person

## **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).
- Issued to the reporting person pursuant to the HCP, Inc. Non-Employee Directors Stock-for-Fees Program in lieu of quarterly director (1) retainer fee.
- (2) Includes 351.6515 shares acquired on August 26, 2015 under the HCP, Inc. Dividend Reinvestment and Stock Purchase Plan.

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.

09/08/2015

Date