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DCT Industria	al Trust Inc.											
Form 4												
May 01, 2015	i											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION											PPROVAL	
UNITED STATES SECURITIES AND EACHANGE COMMISSION									ONID	3235-0287		
Check this box Washington, D.C. 20549								Number:				
if no longe	A #			CEC IN	TDI		CIAI			Expires:	January 31, 2005	
subject to			r Chang				CIAI	LOW	NERSHIP OF	Estimated a		
Section 16 Form 4 or	SECURITIES							burden hou	•			
Form 5		ursuant to	Section 16	(a) of t	he (Securiti	es Fr	chanc	ge Act of 1934,	response	0.5	
obligation	^s Section 1							-	f 1935 or Sectio	n		
may contin See Instruc	nue.		of the Inv	•		•	• •					
1(b).		()				· · · ·	,					
(Print or Type R	esponses)											
				er Name and Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer			
Alexander M	amyn A		Symbol		T				135001			
			DCT Inc	lustrial	Tru	ist Inc.	[DC1		(Chec	k all applicable	e)	
(Last)	(Last) (First) (Middle) 3. Date of Earliest Transaction											
		T	(Month/Da	-					X_ Director 10% Owner Officer (give title Other (specify			
	TRIAL TRUS		04/29/20	015					below)	below)	er (speerry	
800	TH STREET,	SUILE										
800												
				ndment, Date Original					6. Individual or Joint/Group Filing(Check			
Filed(Month/Day/Yea										e) 1 by One Reporting Person		
DENVER, C	O 80202								Form filed by M	Nore than One Re		
	0 00202								Person			
(City)	(State)	(Zip)	Table	e I - Non-	Der	vivative S	ecuri	ties Ac	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction D	Date 2A. Dee	med	3.		4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye	• • • •						Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/	Code Disposed of (D) (Day/Year) (Instr. 8) (Instr. 3, 4 and 5)						Beneficially Owned		Beneficial Ownership	
(Month/Day/Yea			Day/Teal)	Year) (Instr. 8) (Instr. 3, 4 and 5)					Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported			
							or		Transaction(s) (Instr. 3 and 4)			
				Code	V	Amount	(D)	Price	(msu. 5 and 4)			
Common	04/29/2015			А		2,078	А	\$0	10,472 <u>(1)</u>	D		
Stock												

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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	8) D So A (A D of (I	lumber	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code	V (4	A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Alexander Marilyn A DCT INDUSTRIAL TRUST INC. 518 17TH STREET, SUITE 800 DENVER, CO 80202	Х							
Signatures								
/s/ John G. Spiegleman, Attorney-in-Fact	05/01/2015							
**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) On November 17, 2014, the Issuer effected a one-for-four reverse stock split of its Common Stock (the "Reverse Stock Split"). The number of securities beneficially owned was adjusted by dividing by four to reflect the Reverse Stock Split.

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.