Fox Jason E. Form 4 February 15, 2019

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number:

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OMB APPROVAL

if no longer subject to Section 16. Form 4 or Form 5 obligations

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Check this box

SECURITIES 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

30(h) of the Investment Company Act of 1940

See Instruction 1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * Fox Jason E.

> (First) (Middle)

C/O W. P. CAREY INC., 50

ROCKEFELLER PLAZA

(Street)

2. Issuer Name and Ticker or Trading Symbol

W. P. Carey Inc. [WPC]

3. Date of Earliest Transaction

4. If Amendment, Date Original

(Month/Day/Year) 02/13/2019

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

_X__ Director 10% Owner Other (specify X_ Officer (give title

below) **CEO**

below)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

NEW YORK, NY 10020

| (City) | (State) | (Zip) Tabl | e I - Non-E | Derivative S | Securi | ities Acqu | ired, Disposed of | , or Beneficial | ly Owned |
|--------------------------------------|---|---|---|---------------|------------------|------------------------------------|--|---|----------------|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) | | | Beneficially Form: Owned (D) or | 6. Ownership Form: Direct (D) or Indirect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | Code V | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | (Instr. 4) | |
| Common Stock | 02/13/2019 | | A <u>(1)</u> | 20,721 (1) | A | \$ 0 (1) | 484,481 | D | |
| Common Stock | 02/13/2019 | | F | 9,541 | D | \$ 75.01 | 474,940 | D | |
| Common Stock | | | | | | | 861.6719 | I | by son |
| Common Stock | | | | | | | 62.7999 | I | by daughter |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title o | | 3. Transaction Date | | 4. | 5. | 6. Date Exerc | | 7. Title | | 8. Price of | 9. Nu |
|-------------------------------------|---|---------------------|---|---------------------------------|--|---------------------|--------------------|--|--|--------------------------------------|---|
| Derivativ Security (Instr. 3) | e Conversion or Exercise Price of Derivative Security | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transacti Code (Instr. 8) | ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | . | | Amoun Underly Securit (Instr. 2 | ying | Derivative Security (Instr. 5) | Deriv Secur Bene Own Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title 1 | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| r g | Director | 10% Owner | Officer | Other | | | |
| Fox Jason E. C/O W. P. CAREY INC. 50 ROCKEFELLER PLAZA | X | | CEO | | | | |
| NEW YORK, NY 10020 | | | | | | | |

Signatures

/s/ James A. Fitzgerald, Attorney-in-fact 02/15/2019

**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 January 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.

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