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STAG Indu Form 4											
January 08,									PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								-	-	07	
Check tl	his box		Wa	ashington	, D.C. 20)549		Number:	3235-028		
if no lon subject t Section Form 4 Form 5		SECUI	RITIES	WNERSHIP OF	Estimated burden ho response	urs per					
obligation may cor <i>See</i> Insta 1(b).	ons Section 17((a) of the	Public U	Jtility Hol	ding Co		nge Act of 1934, t of 1935 or Secti 1940				
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> COLBERT VIRGIS			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer				
				Industrial	-	-	(Check all applicable)				
(Last) (First) (Middle) C/O STAG INDUSTRIAL, INC., ONE FEDERAL STREET, 23RD FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 01/06/2016				X_ Director 10% Owner Officer (give title Other (specify below) below)				
(Street) BOSTON, MA 02110			4. If Amendment, Date Original Filed(Month/Day/Year)			l	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(State)	(Zip)					Person				
	``						Acquired, Disposed		•		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactic Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	(A) or of (D) 4 and 5) (A)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or (D) Price	(Instr. 3 and 4)				
Reminder: Re	port on a separate line	e for each cl	ass of sec	curities bene	ficially ow	ned directly	or indirectly.				
	Persons who respond to the collect information contained in this form a required to respond unless the form displays a currently valid OMB cont number.								SEC 1474 (9-02)		
	Tab					sposed of, or convertible	Beneficially Owner securities)	i			
1. Title of	2. 3. Trans	saction Date	3A. De	emed	4.	5. Number	r 6. Date Exercisa	able and 7. Ti	tle and Amour	nt o	

1. Title of
Derivative2.3. Transaction Date3A. Deemed4.5. Number6. Date Exercisable and
Expiration Date7. Title and Amount of
Underlying Securities8. Pric
Derivative

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	(Instr. 8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		Securit (Instr.
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
LTIP Units (1)	(2)	01/06/2016		А		3,744		(2)	(2)	Common Stock, par value \$0.01 per share	3,744	<u>(2)</u>

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
COLBERT VIRGIS C/O STAG INDUSTRIAL, INC. ONE FEDERAL STREET, 23RD FLOOR BOSTON, MA 02110	Х						
Signatures							
/s/ Jeffrey M. Sullivan, Attorney-in-Fact	01/08/20	016					

**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) The long-term incentive plan units ("LTIP Units") of STAG Industrial Operating Partnership, L.P. ("Operating Partnership") were granted to the reporting person on January 6, 2016 pursuant to the 2011 Equity Incentive Plan of STAG Industrial, Inc. (the "Issuer").

LTIP Units are subject to forfeiture until January 1, 2017. Over time, the LTIP Units can achieve full parity with the common units of limited partnership of the Operating Partnership ("OP Units") for all purposes. If such parity is reached, non-forfeitable LTIP Units may

(2) be converted into OP Units and then may be redeemed for cash equal to the then-current market value of one share of the Issuer's common stock or, at the Issuer's election, for shares of the Issuer's common stock on a one-for-one basis. LTIP Units do not have an expiration date.

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.