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EPR PROPER	RTIES									
Form 4	2014									
February 20, 2										PPROVAL
FORM	4 UNITED S	STATES		ITIES AN hington, 1			GE C	COMMISSION	OMB Number:	3235-0287
Check this				8,-					Expires:	January 31
subject to Section 16	Section 16. Form 4 or				TIES				Expires: 20 Estimated average burden hours per response 0	
obligation may contin <i>See</i> Instruct 1(b).	$\frac{s}{nue.}$ Section 17(a	a) of the		lity Holdi	ing Comp	pany .	Act of	1935 or Section	1	
(Print or Type R	esponses)									
1. Name and Address of Reporting Person <u>*</u> Brain David M.			2. Issuer Name and Ticker or Trading Symbol EPR PROPERTIES [EPR]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	(liddle)	3. Date of Earliest Transaction (Check all a					k all applicable	e)	
(1			(Month/Day/Year) 02/18/2014				X Director 10% Owner X Officer (give title Other (specify below) below) CEO and President			
			mendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
KANSAS CI	TY, MO 64106							Form filed by M Person	lore than One Re	eporting
(City)	(State)	(Zip)	Table	I - Non-De	erivative So	ecuriti	ies Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deer Execution any (Month/D		on Date, if	1			l of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Shares of Beneficial Interest	02/18/2014			A <u>(1)</u>	25,308 (1)	A	\$ 0 (1)	380,893	D	
Common Shares of Beneficial Interest	02/18/2014			A <u>(2)</u>	43,744 (2)	A	\$ 0 (2)	424,637	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Share
Option to Purchase Common Shares of Beneficial Interest	\$ 51.64	02/18/2014		A <u>(3)</u>	53,257 (<u>3)</u>	01/01/2015	01/01/2025	Common Shares of Beneficial Interest	53,25 (<u>3</u>)

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Brain David M. 909 WALNUT SUITE 200 KANSAS CITY, MO 64106	Х		CEO and President			
Signatures						

/s/ David M. Brain	02/19/2014		
<u>**</u> 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) At the election of the Reporting Person, the Common Shares of Beneficial Interest were issued in lieu of a cash bonus and vest in three annual installments, beginning January 1, 2015.
- (2) The Common Shares of Beneficial Interest were granted to the Reporting Person as long-term compensation and vest in four annual installments, beginning January 1, 2015.
- (3) Options vest and become exercisable in four annual installments beginning January 1, 2015.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Reporting Owners

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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.