W. P. Carey	Inc.												
Form 4													
July 02, 2015	5												
FORM 4 UNITED STATES SECURITIES AND									OMB APPROVAL				
	CUNIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287				
	Check this box							Expires:	January 31,				
if no long subject to		STATEMENT OF CHANGES IN BEN				ENEFICIAL OWNERSHIP OF				2005			
Section 1		SECURITIES							Estimated average burden hours per				
Form 4 or	r								response	•			
Form 5		^					-	ge Act of 1934,					
obligatior may conti		17(a) of the	Public Ut	ility Hold	ing Com	pany	Act o	of 1935 or Section	n				
See Instru		30(h)	of the Inv	vestment (Company	y Act	of 19	40					
1(b).													
(Print or Type R	Responses)												
		*											
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading					g	5. Relationship of Issuer	f Reporting Per	son(s) to					
MITTELSI.	•				ymbol								
			W. P. Carey Inc. [WPC]					(Check all applicable)					
(Last)	(First) (Middle) 3. Date of			Earliest Transaction									
				(Month/Day/Year)			XDirector		b Owner				
			07/01/20	07/01/2015				Officer (give titleOther (specify below) below)					
ROCKEFEL	LLER PLAZ	A						,					
	(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check					
								Applicable Line)					
								_X_Form filed by					
NEW YORI	K, NY 10020)						Form filed by I Person	More than One Ke	eporung			
(City)	(State)	(Zip)											
(eny)	(Blate)	(24)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficial	lly Owned			
1.Title of		n Date 2A. Dee		3.	4. Securi			5. Amount of Securities	6. Ownership	7. Nature of			
Security	(Month/Day/	Ionth/Day/Year) Execution Date			· · · · ·				Form: Direct	Indirect			
(Instr. 3)		any (Month	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				•	(D) or Indirect (I)	Beneficial Ownership				
(WINDOW)			Day(Tear) (IIISU. 6) (IIISU. 5, 4 and 5)				5)	Following	(Instr. 4)	(Instr. 4)			
						(1)		Reported	~ /	× ,			
						(A) or		Transaction(s)					
				Code V	Amount	(D)	Price	(Instr. 3 and 4)					
Common Stock	07/01/2015	5		A <u>(1)</u>	1,346	A	\$ 0 (1)	22,569	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	3	ate	Amou Under Securi	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

er

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Othe			
MITTELSTAEDT ROBERT E JR C/O W. P. CAREY INC. 50 ROCKEFELLER PLAZA NEW YORK, NY 10020	Х						
Signatures							
/s/ James A. Fitzgerald, Attorney-in-fact		07/02/2015					
**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) Represents an award of restricted shares, granted under the Issuer's 2009 Non-Employee Directors' Incentive Plan, which are scheduled to vest in full on the anniversary of the grant 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.