## Edgar Filing: SHELTON JAMES D - Form 4

SHELTON . Form 4	JAMES D											
October 02,	2017											
FORM	ORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
	Washington, D.C. 20549						DMMISSION	OMB Number:	er: 3235-0287			
Check th if no lon subject to Section 7 Form 4 of Form 5 obligatio	ger of 16. or Filed pu	rsuant to S	ENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES nant to Section 16(a) of the Securities Exchange Act of 1934,						Expires: January 3 20 Estimated average burden hours per response 0			
may con See Instr 1(b).	tinue. Section 17			•	ding Com Company			935 or Section	I			
(Print or Type	Responses)											
SHELTON JAMES D S			2. issuer raune und riener er ridding				>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Mo			(Month/I	Date of Earliest Transaction Month/Day/Year) 0/01/2017				X_ Director 10% Owner Officer (give title Other (specify below) below)				
			Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
CHICAGO	, IL 60654						-	Form filed by Mo Form filed by Mo Person				
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative S	ecurit	ies Acqui	ired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)		Date, if	3. Transactic Code (Instr. 8) Code V	4. Securitie opr Disposed (Instr. 3, 4	d of (D	))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	10/01/2017			A	297.482 (1)	A	\$ 65.13	29,158.576 $(2) (3)$	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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
SHELTON JAMES D 353 N. CLARK STREET SUITE 3300 CHICAGO, IL 60654	Х							
Signatures								
James D. Shelton, By: T. Richa Attorney-In-Fact	ard Riney	,		10/02/2017				
<u>**</u> Signature of Reporting	ng 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).
- Common stock in the form of units granted under the Ventas Nonemployee Directors' Deferred Stock Compensation Plan (the "Plan") in (1) lieu of director fees pursuant to the director's deferral election. Such units are payable solely in common stock and subject to the terms and conditions of the director's deferral election and the Plan.
- Includes 103.519 units acquired on September 29, 2017 under the Plan as a result of dividend equivalents credited with respect to the (2) dividend on Issuer's common stock paid on September 29, 2017.
- (3) As of October 1, 2017, Reporting Person owns options to purchase an aggregate of 23,760 shares of Issuer's common stock.

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.

Date