Edgar Filing: HEALTHCARE REALTY TRUST INC - Form 4

HEALTHCARE REALTY TRUST INC

Form 4

January 02, 2015

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

3235-0287 Number:

OMB APPROVAL

January 31, Expires: 2005

Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

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 may continue.

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

See Instruction

1. Name and A HOLMES S	2. Issuer Name and Ticker or Trading Symbol HEALTHCARE REALTY TRUST INC [HR]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) 3. (M				3. Date of Earliest Transaction (Month/Day/Year) 12/31/2014					Director 10% Owner Officer (give title Other (specify below)			
NASHVILI	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									ly Owned		
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	Transaction Date 2A. Deemed Execution Date any (Month/Day/Ye)			Code (Instr. 3, 4 and 5)					5. Amount of Securities Beneficially Owned Owned Following Reported (Instr. 4) Transaction(s) (Instr. 3 and 4) 6. 7. Nature of Ownership Beneficial Ownership Ownership Indirect (I) (Instr. 4) (Instr. 4)		
Common Stock	12/31/2014			A	1	17,189	A	\$ 27.32	249,500	D		
Common Stock	01/01/2015			A	1	17,090	A	\$ 27.48	266,590	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)required to respond unless the form displays a currently valid OMB control number.

Edgar Filing: HEALTHCARE REALTY TRUST INC - Form 4

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration Date		Amoun	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A manuat		
									Amount		
						Date	Expiration		Or Number		
						Exercisable	Date	Title Number of			
				C + V	(A) (D)						
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships

Reporting Owner Name / Address Director Officer Other Owner

HOLMES SCOTT W C/O HEALTHCARE REALTY TRUST **INCORPORATED** 3310 WEST END AVENUE, SUITE 700 NASHVILLE, TN 37203

Executive Vice President & **CFO**

Signatures

/s/Rita H. Todd as power of 01/02/2015 attorney

**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).

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.

Reporting Owners 2