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Andrews Har Form 4	old W. Jr.										
November 24	I , 2010										
FORM	4			OMB APPROVAL							
	UNIII	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, e. 20(b) of the Javastment Company Act of 1935 or Section								3235-0287	
Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	er STAT 6. Filed ¹⁸ Section									January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type R	lesponses)										
1. Name and Address of Reporting Person <u>*</u> Andrews Harold W. Jr.			2. Issuer Name and Ticker or Trading Symbol Sabra Health Care REIT, Inc. [SBRA]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3.				Earliest Tra ay/Year))10	ansaction			Director 10% Owner Officer (give title Other (specify below) below) below) Executive VP, CFO & Secretary			
	Filed(Mon				te Original			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
IRVINE, CA	A 92612							Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)		Date 2A. Dee Zear) Execution any (Month/	emed	3.	4. Securit on(A) or Dis (D) (Instr. 3, 4	ies Ac sposed	quired of	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	
Common Stock	11/22/2010			А	23,202 (1)	А	\$0	23,202	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)

1. Title of Derivative Security (Instr. 3)	or Exercise a		3A. Deemed Execution Date, if any (Month/Day/Year)	on Date, if Transacti Code		Expiration D	6. Date Exercisable and Expiration Date (Month/Day/Year)		te and unt of crlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Reporting Owners											
Re	Reporting Owner Name / Address Director			Relationships					Other		
C/O SAB 18500 VO		Ir. TH CARE REIT, I AN, SUITE 550	INC.		Executive VP, CFO & Secu				/		

Signatures

/s/ Richard K. Matros as Attorney-in-Fact

11/24/2010

**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).

Grant of stock units under the Issuer's 2009 Performance Incentive Plan (the "Plan"). Subject to the satisfaction of a performance requirement for the 2011 calendar year that will be established by the Issuer prior to or during the first 90 days of calendar 2011 in

(1) accordance with the provisions of the Plan applicable to performance-based awards, the units vest at the rate of 20% on each of January 22, 2012 and November 22, 2012, 2013, 2014 and 2015. Promptly after vesting, the vested units will be paid on a one-for-one basis in shares of the 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.

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