## Edgar Filing: MCDOWELL PAUL H - Form 4

MCDOWEL	L PAUL H									
Form 4										
March 25, 20	010									
FORM		OMB APPROVAL								
Washington, D.C. 20549								OMB Number:	3235-0287	
Check this box if no longer								Expires:	January 31,	
subject to STATEMENT OF CHANGES IN BENEFICIAL OWN							NERSHIP OF	Estimated a	2005 average	
	Section 16. SECURITIES							burden hou	rs per	
Form 4 c Form 5			1(()) ()			1	A ( C1024	response	0.5	
obligatio	<b>n</b> o <b>*</b>					-	ge Act of 1934,			
may cont	tinue. Section 17(2		e Investmen	•	<b>-</b>		f 1935 or Sectio	n		
See Instr	uction	50(fi) of th	e mvestmen	t Compan	y Act	01 194	+0			
1(b).										
(Print or Type ]	Responses)									
1 Name and A	Address of Reporting I	Derson* a t	N	1.00.1	<b>F</b> 1.		5 Pelationship of	Paparting Dar	son(s) to	
	LL PAUL H		2. Issuer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
		-	Symbol CapLease, Inc. [LSE]							
(1 4)							(Check all applicable)			
(Last)	(First) (N		3. Date of Earliest Transaction				_X_ Director10% Owner			
C/O CAPLI	EASE INC., 1065		Month/Day/Year) )3/24/2010				XOfficer (give titleOther (specify			
AVENUE OF THE AMERICAS					below) below) Chairman and CEO					
	(Street)		4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Month/Day/Year)						Applicable Line) _X_ Form filed by One Reporting Person				
NEW YORK NY 10018 Form filed by More than One Reporting										
							Person			
(City)	(State) (	(Zip)	Table I - Non-	Derivative S	Securit	ties Acc	uired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Date		3.					6. Ownership		
Security (Instr. 3)	(Month/Day/Year)	Execution Date any	e, if Transact Code				Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(1130. 5)		•	ear) (Instr. 8)	· · ·	4 and 5	5)	•	Indirect (I)	Ownership	
		•					Following	(Instr. 4)	(Instr. 4)	
					(A)		Reported Transaction(s)			
			<b>C</b> 1 1	7 4 .	or	р.	(Instr. 3 and 4)			
Common			Code	V Amount 75,800	(D)	Price				
Stock	03/24/2010		А	(1)	А	\$0	606,376	D		
				_					$D_{-1}$ (01 (1)	
Common Stock							8,725	Ι	By 401 (k) Plan	
SIUCK									r lall	

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.

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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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
MCDOWELL PAUL H C/O CAPLEASE INC. 1065 AVENUE OF THE AMERICAS NEW YORK, NY 10018	Х		Chairman and CEO				
Signatures							
/s/ Paul H							

/s/ Paul H. 03/24/2010 **McDowell** 

\*\*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) Restricted stock award under the company's stock plan, which is a Rule 16b-3 plan.

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.