## Edgar Filing: HCP, INC. - Form 4

| HCP, INC.  |                      |  |                                |  |                              |                        |              |  |                        |                        |  |
|--|----------------------|--|--------------------------------|--|------------------------------|------------------------|--------------|--|------------------------|------------------------|--|
| Form 4   |                      |  |                                |  |                              |                        |              |  |                        |                        |  |
| February 16  | , 2016               |  |                                |  |                              |                        |              |  |                        |                        |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION                    |                      |  |                                |  |                              |                        |              |  | OMB APPROVAL           |                        |  |
| UNITED STATES SECURITIES AND EXCHANGE COMMISSION<br>Washington, D.C. 20549 |                      |  |                                |  |                              |                        | OMMISSION    | OMB<br>Number:   | 3235-0287              |                        |  |
| Check th   | aer                  |  |                                |  |                              |                        |              |  | Expires:               | January 31,<br>2005    |  |
| subject to   |                      |  |                                |  | S IN BENEFICIAL OWNERSHIP OF |                        |              | Estimated average<br>burden hours per                      |                        |                        |  |
| Section 16. SECURITIES   |                      |  |                                |  |                              |                        |              |  |                        |                        |  |
| Form 4 o<br>Form 5   |                      | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |                                |  |                              |                        |              | A at of $1024$   | response               | 0.5                    |  |
| obligatio  | -                    |  |                                |  |                              |                        | -            | Act of 1954,<br>1935 or Section                            |                        |                        |  |
| may con  | unue.                |  |                                | •  | •                            | -                      | ct of 1940   |  | l                      |                        |  |
| <i>See</i> Instr<br>1(b).  | uction               | 50(11)   |                                | , estinent   | compu                        |                        |              |  |                        |                        |  |
|  |                      |  |                                |  |                              |                        |              |  |                        |                        |  |
| (Print or Type   | Responses)           |  |                                |  |                              |                        |              |  |                        |                        |  |
|  |                      | ~ *  |                                |  |                              |                        |              |  |                        |                        |  |
| 1. Name and A<br>McHenry T   | Address of Reporting | g Person _   |                                | r Name <b>an</b>                                       | I Ticker of                  | Trad                   |              | 5. Relationship of I<br>Issuer                             | Reporting Person(s) to |                        |  |
| Wierrein y 1   | IOy L.               |  | Symbol                         |  |                              |                        | -            |  |                        |                        |  |
|  | HCP, INC. [HCP]      |  |                                |  |                              | (Check all applicable) |              |  |                        |                        |  |
|  |                      |  |                                | 3. Date of Earliest Transaction                        |                              |                        |              | D: (   | 100                    | 0                      |  |
|  |                      |  | (Month/Day/Year)<br>02/11/2016 |  |                              |                        | -            | Director<br>_X Officer (give t                             |                        | Owner<br>r (specify    |  |
|  |                      |  |                                |  |                              |                        | ł            | below) below)<br>EVP, Gen Counsel and Corp Sec             |                        |                        |  |
|  |                      |  |                                |  |                              |                        |              |  |                        | -                      |  |
|  |                      |  |                                | If Amendment, Date Original                            |                              |                        |              | 6. Individual or Joint/Group Filing(Check                  |                        |                        |  |
| Filed(   |                      |  |                                | ed(Month/Day/Year)                                     |                              |                        |              | Applicable Line)<br>_X_ Form filed by One Reporting Person |                        |                        |  |
| IRVINE, C  | A 92614              |  |                                |  |                              |                        | -            | Form filed by Me   |                        |                        |  |
|  |                      | (7.)   |                                |  |                              |                        | 1            | Person   |                        |                        |  |
| (City)   | (State)              | (Zip)  | Tab                            | le I - Non-l   | Derivative                   | Secu                   | rities Acqui | ired, Disposed of,   | or Beneficial          | y Owned                |  |
| 1.Title of   | 2. Transaction Date  |  |                                | 3. 4. Securities Acquired (A                           |                              |                        |              | 5. Amount of   | 6.                     | 7. Nature of           |  |
| Security<br>(Instr. 3)   | (Month/Day/Year)     | Execution<br>any   | Date, if                       | Transaction Disposed of (I<br>Code (Instr. 3, 4 and 5) |                              |                        |              | Securities<br>Beneficially                                 | Ownership<br>Form:     | Indirect<br>Beneficial |  |
| (1150.5)   |                      | (Month/Da  | ay/Year)                       | (Instr. 8)   | (111511: 5,                  | i una                  | 5)           | Owned  | Direct (D)             | Ownership              |  |
|  |                      |  |                                |  |                              |                        |              | Following  | or Indirect            | (Instr. 4)             |  |
|  |                      |  |                                |  |                              | (A)                    |              | Reported<br>Transaction(s)                                 | (I)<br>(Instr. 4)      |                        |  |
|  |                      |  |                                | Cala V   | A                            | or                     | Duiter       | (Instr. 3 and 4)   | (Insu: I)              |                        |  |
| Common   |                      |  |                                | Code V   |                              | (D)                    | Price<br>\$  |  |                        |                        |  |
| Stock  | 02/11/2016           |  |                                | Р  | 1,000                        | А                      | ¢<br>25.7449 | 27,320.213   | 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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Secur | ınt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owno<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|--|---|---------------------|--------------------|-------|--|---|--|
|   |   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                                 | Relationships |                   |                               |       |  |  |  |
|---|---------------|-------------------|-------------------------------|-------|--|--|--|
|   | Director      | 10% Owner Officer |                               | Other |  |  |  |
| McHenry Troy E.<br>1920 MAIN STREET<br>SUITE 1200<br>IRVINE, CA 92614 |               |                   | EVP, Gen Counsel and Corp Sec |       |  |  |  |
| Signatures  |               |                   |                               |       |  |  |  |
| Scott A. Graziano, VP, Legal<br>(Attorney-In-Fact)                    |               |                   | 02/16/2016                    |       |  |  |  |
| **Signature of Reporting Pers   | on            |                   | Date                          |       |  |  |  |
| <b>Explanation of Re</b>  | spon          | ses:              |                               |       |  |  |  |

\* 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.