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HEALTH CARE PROPERTY INVESTORS INC

Form 4/A April 02, 2007

FORM 4

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

OMB APPROVAL OMB 3235-0287

Check this box

Number: January 31, Expires: 2005

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Estimated average **SECURITIES**

burden hours per response... 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations 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).

Common

Common

Common

Stock

Stock

Stock

03/15/2007

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * FLAHERTY JAMES F III			Symb HEA	suer Name and Ticker or Trading ol LTH CARE PROPERTY ESTORS INC [HCP]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(Last) 3760 KILR	(First) (S	(Mont	e of Earliest Transaction h/Day/Year) 5/2007	_X Director 10% Owner _X Officer (give title Other (specify below) below) Chief Executive Officer			
	SUITE 300)			Chief Baccaire Gricei			
	(Street)			mendment, Date Original	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
LONG BEACH, GA 0000C			`	Month/Day/Year) 5/2007				
	LONG BE	ACH, CA 90806			Person			
	(City)	(State)	(Zip) T	able I - Non-Derivative Securities A	cquired, Disposed of, or Beneficially Owned			
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Yea	Code (Instr. 3, 4 and 5)	Beneficially Form: Beneficial Owned Direct (D) Ownership Following or Indirect (Instr. 4) Reported (I) Transaction(s) (Instr. 4) (Instr. 3 and 4)			

Code V Amount

20,130

F

(D)

D

Price

36.75

\$

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

769,197.93

(1)

2,400

573

D

I

I

SEC 1474 (9-02)

Irrevocable

IRA Held

by Spouse

Trust

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displays a currently valid OMB control number.

Relationshins

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		4.	5.	6. Date Exerc		7. Title		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amour Underl Securit (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Kelationships				
•	Director	10% Owner	Officer	Other	
FLAHERTY JAMES F III 3760 KILROY AIRPORT WAY, SUITE 300	X		Chief Executive Officer		
LONG BEACH, CA 90806					

Signatures

Edward J. Henning, Power of Attorney for James F.
Flaherty III

04/02/2007

**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) This amended Form 4 is filed solely to correct the number of securities reported in Table I, column 5, as beneficially owned by the Reporting Person following the reported transaction.

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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