#### GOODWIN DANIEL L

Form 4 June 16, 2011

### FORM 4

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

**OMB APPROVAL** 

Check this box

if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Section 16.

**OMB** Number:

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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 30(h) of the Investment Company Act of 1940

**SECURITIES** 

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* GOODWIN DANIEL L

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

(Middle)

(Zip)

INLAND REAL ESTATE CORP

(Check all applicable)

[IRC]

(Last) (First) 3. Date of Earliest Transaction

X Director Officer (give title below)

10% Owner Other (specify

2901 BUTTERFIELD RD

(Street)

(State)

(Month/Day/Year)

06/15/2011

(Month/Day/Year)

4. If Amendment, Date Original

(Instr. 8)

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

(Instr. 4)

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

OAK BROOK, IL 60523

(City)

Security

(Instr. 3)

2. Transaction Date 2A. Deemed 1.Title of

3. 4. Securities Execution Date, if TransactionAcquired (A) or Code Disposed of (D)

5. Amount of Securities Beneficially Owned

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I)

(Instr. 4)

(A)

(Instr. 3, 4 and 5)

Following Reported Transaction(s) (Instr. 3 and 4)

or Code V Amount (D) Price

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

any

(Month/Day/Year)

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.

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

1. Title of Derivative Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if

5. Number Transaction of Derivative Expiration Date Code Securities

6. Date Exercisable and (Month/Day/Year)

7. Title and Amount of 8 Underlying Securities  $\Gamma$ (Instr. 3 and 4) S

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| (Instr. 3)                  | Price of<br>Derivative<br>Security | ()         | Month/Day/Year) | (Instr. | Í | Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) |     |                     |                    |                 |  |  |
|-----------------------------|------------------------------------|------------|-----------------|---------|---|--|-----|---------------------|--------------------|-----------------|--|--|
|                             |                                    |            |                 | Code    | V | (A)  | (D) | Date<br>Exercisable | Expiration<br>Date | Title           | Amount<br>or<br>Number<br>of<br>Shares |  |
| Stock Option (Right to buy) | \$ 8.76                            | 06/15/2011 |                 | A       |   | 1,000  |     | 06/15/2013          | 06/15/2021         | Common<br>Stock | 1,000                                  |  |

# **Reporting Owners**

| Reporting Owner Name / Address                                 | Relationships |           |         |       |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|
|  | Director      | 10% Owner | Officer | Other |  |  |  |
| GOODWIN DANIEL L<br>2901 BUTTERFIELD RD<br>OAK BROOK, IL 60523 | X             | X         |         |       |  |  |  |

## **Signatures**

/s/Daniel L.
Goodwin

\*\*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.

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