SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: Estimated average burden 0.5 hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| SHELLEY-KESSLER PAMELA | | | 2. Issuer Name and Ticker or Trading Symbol <u>LTC PROPERTIES INC</u> [LTC] | | tionship of Reporting Person(s all applicable) Director Officer (give title below) | s) to Issuer 10% Owner Other (specify below) |
|---------------------------------|------------------------------|----------------|--|---------------|--|---|
| SUITE 200 | 55 OAK CREST DRIVE TE 200 | | 3. Date of Earliest Transaction (Month/Day/Year) 02/27/2009 | | SVP, CFO & Sec | pretary |
| (Street) WESTLAKE VILLAGE | CA (State) | 91361 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv X | idual or Joint/Group Filing (Cł Form filed by One Reportir Form filed by More than Or | ig Person |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|-----------------------------|---|--|---------------|---------|--|---|---|
| | | | | v | Amount | (A) or (D) | Price | (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | | | | | | | | 1,059 | Ι | See footnote ⁽¹⁾ |
| Common Stock | 02/27/2009 | | Α | | 5,627(2) | D | \$17.06 | 39,027 | D | |

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. Transac Code (Ir 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|---|--|---|---------------------------------|---|-----|-----|--|--------------------|--|----------------------------------|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |
| Stock Options | \$23.79 | | | | | | | 05/15/2008 | 05/15/2015 | Common Stock | 10,000 | | 10,000 | D | |
| Stock Options | \$23.79 | | | | | | | 05/15/2009 | 05/15/2016 | Common Stock | 10,000 | | 20,000 | D | |
| Stock Options | \$23.79 | | | | | | | 05/15/2010 | 05/15/2017 | Common Stock | 10,000 | | 30,000 | D | |

Explanation of Responses:

1. Company contribution/reinvestment of dividend held on shares held in deferred compensation trust. Individuals have no voting rights over such shares.

2. Restricted stock grant. Shares vest equally over three years based on the reporting person's continued employment at each vesting date.

/s/ Pamela J Shelley-Kessler

** Signature of Reporting Person

03/03/2009 Date

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

* 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.

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 Number.

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