Edgar Filing: CAPITAL TRUST INC - Form 4

CAPITAL TI	RUST INC											
Form 4												
July 18, 2005	i											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287				
check this box if no longer									Expires:	January 31,		
subject to		EMENT O	F CHAN	GES IN BENEFICIAL OWN				NERSHIP OF	Estimated	2005 average		
Section 10				SECUR	SECURITIES					burden hours per		
Form 4 or Form 5			C 14		a	-			response	response 0.5		
obligation	· · ·						-	ge Act of 1934,				
may conti	nue. Section I			•	•	• •		of 1935 or Sectio	n			
See Instru	ction	50(II)) of the Inv	vestment	company	y Act	01 19	40				
1(b).												
(Print or Type R	esponses)											
1. Name and Address of Reporting Person * HYMAN EDWARD S2. Issuer Symbol			r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
•				L TRUS	T INC [C	T]		(Charle all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	insaction			(Cnee	ck all applicable	e)		
(Month/Da				Day/Year)				_X_ Director10% Owner				
C/O ISI GROUP, 535 MADISON 07/15/20)05				Officer (give title Other (specify below) below)					
AVENUE, 3	0TH FLOOR							001010)	001010)			
(Street) 4. If Amer			nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check					
Filed(Mont							Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
NEW YORK	K,, NY 10022							Person	viore man One K	eporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
(Instr. 3) any				1 ()			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Class A				Coue V	Amount	(D)	Ffice					
Common	07/15/2005			А	4	А	<u>(1)</u>	225	D			
Stock Units												

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 Derivat Security (Instr. 3	ive Convers or Exerc	on (Month/Day ise	any	ion Date, if Tra Coo	ansaction ode (nstr. 8) [(((((((Number	6. Date Exerc Expiration Da (Month/Day/	ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Co	ode V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
HYMAN EDWARD S C/O ISI GROUP 535 MADISON AVENUE, 30TH FLOOR NEW YORK,, NY 10022	Х						
Signatures							
/s/ Geoffrey G. Jervis, on behalf of Edward Hyman	S.	07/18/2005					
**Signature of Reporting Person		Da	ite				

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).

Represents Class A Common Stock Units credited to the account of the Reporting Person which convert to shares of Class A Common Stock on a one-for-one basis. The number of shares of Class A Common Stock subject to the Class A Common Stock Units credited to

(1) the Reporting Person was determined by dividing (1) the product of the number of shares of Class A Common Stock subject to all Class A Common Stock Units held by the Reporting Person and the per share dollar amount of the Class A Common Stock dividend paid by the Company on July 15, 2005 by (2) the closing price of the Class A Common Stock on the New York Stock Exchange on July 15, 2005.

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.