Edgar Filing: EASTGROUP PROPERTIES INC - Form 4

EASTGROU Form 4 January 05, 2	IP PROPERTIE	S INC										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COM									OMB APPROVAL			
FURIWI 4 UNITED STATES S				SECURITIES AND EXCHANGE CC Washington, D.C. 20549				OMMISSION	OMB Number:	3235-0287		
Check thi if no long	or								Expires:	January 31, 2005		
subject to Section 1	, SIAIE	MENT OI	F CHAN	GES IN BENEFICIAL OWNI SECURITIES				NERSHIP OF	Estimated average burden hours per			
Form 4 of Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed pu inue. Section 17	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							response	0.5		
(Print or Type R	Responses)											
PETSAS WILLIAM D Symbol				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
			[EGP]	TGROUP PROPERTIES INC ']				(Check all applicable)				
(Last) (First) (Middle) 3. Date of (Month/D 2200 E. CAMELBACK ROAD, 01/01/20 SUITE 210				-				Director 10% Owner X Officer (give title Other (specify below) below) Senior Vice President				
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
PHOENIX,	AZ 85016							Form filed by M Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)		n Date, if	Code (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)					
G				Code V	Amount	or (D)	Price \$	Transaction(s) (Instr. 3 and 4)				
Common Stock	01/01/2015			F	2,349	D	63.23 (1)	119,175 <u>(2)</u>	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)

1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
PETSAS WILLIAM D 2200 E. CAMELBACK ROAD, SUITE 210 PHOENIX AZ 85016			Senior Vice President				
PHOENIX, AZ 85016 Signatures			President				
Michael C. Donlon, Attorney-in-Fact for Willia Petsas	m D.	01/05/20	15				
**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).

On January 1, 2015, 9,505 restricted shares vested and the Reporting Person instructed the Company to withhold 2,349 shares to cover (1) tax withholding obligations as permitted under the Company's 2013 Equity Incentive Plan and the Company's 2004 Equity Incentive Plan, as amended.

(2) As of the date hereof, the Reporting Person's direct beneficial ownership includes 31,836 restricted shares granted under the Company's 2013 Equity Incentive Plan and the Company's 2004 Equity Incentive Plan, as amended, that have not yet vested.

Remarks:

The securities listed as direct ownership are owned by the Reporting Person and his spouse as co-trustees for the Petsas Revoc

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.