## Edgar Filing: Smith Daniel Earl - Form 4

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Form 4										
January 25, 2019         FORM 4         UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549         Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).       STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES         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							OMB APPROVAL OMB 3235-0287 Number: January 31, Expires: January 31, 2005 Estimated average burden hours per response 0.5			
(Print or Type Re	esponses)									
1. Name and Address of Reporting Person <u>*</u> Smith Daniel Earl			2. Issuer Name <b>and</b> Ticker or Trading Symbol CONSOLIDATED TOMOKA LAND CO [CTO]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) P.O. BOX 10809			3. Date of Earliest Transaction (Month/Day/Year) 01/23/2019				Director       10% Owner         Officer (give title below)       Other (specify below)         Sr. VP & General Counsel			
	If Amendment, Date ed(Month/Day/Year)	Amendment, Date Original (Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
	BEACH, FL 321						Person	viore than one R	porting	
(City) 1.Title of Security (Instr. 3)	(State) ( 2. Transaction Date (Month/Day/Year)		l 3. Date, if Transactio Code	4. Securit nAcquired Disposed (Instr. 3,	ties (A) o of (D	r )	<b>Guired, Disposed o</b> 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	f, or Beneficial 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common Stock	01/23/2019		А	2,055 (1)	A	\$0	13,682 <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)

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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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
Smith Daniel Earl P.O. BOX 10809 DAYTONA BEACH, FL 32120			Sr. VP & General Counsel					
Signatures								
/s/ Daniel E.	5/2010							

Smith 01/25/2019

<u>\*\*</u>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).
- Restricted shares one-third of which vest on each of the first, second and third anniversaries of January 28, 2019, provided that the reporting person is an employee of the Issuer on those dates. The fair market value of the common stock on the date of the grant was \$59.89 per share, but the fair market value of the award when vested will be the fair market value of the common stock on each vesting date.
- (2) This amount includes the 2,055 restricted shares reported above, as well as 4,134 additional shares of restricted common stock which vest over time, which were previously reported.

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.