Edgar Filing: HEALTH CARE PROPERTY INVESTORS INC - Form 4

HEALTH C. Form 4 May 09, 200	ARE PROPERTY	INVESTORS I	NC							
FORM 4 OMB APPROVAL UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB Number: 3235-028 Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Expires: January 3 200								3235-0287 January 31, 2005 Iverage		
(Print or Type I 1. Name and A MAULBET	suer Name and Ticker or Trading ol LTH CARE PROPERTY ESTORS INC [HCP]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
3760 KILROY AIRPORT WAY (Month/E 05/08/2			of Earliest Transaction /Day/Year) /2006 nendment, Date Original				Director 10% Owner X Officer (give title Other (specify below) Executive Vice President 6. Individual or Joint/Group Filing(Check			
LONG BEA (City)	CH, CA 90806 (State)	7:>	onth/Day/Yea		Secur	ities Acq	Applicable Line) _X_ Form filed by O Form filed by M Person uired, Disposed of	Iore than One Re	porting	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	05/08/2006		F	476	D	\$ 26.88	70,771	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Secur	erlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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			
MAULBETSCH STEPHEN R 3760 KILROY AIRPORT WAY LONG BEACH, CA 90806			Executive Vice President				
Signatures							
0. 1 D							

Stephen R. Maulbetsch 05/09/2006

<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).

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.