Edgar Filing: EPR PROPERTIES - Form 5

| Form 5 | HES | | | | | |
|---|--------------|------------|--|---------------------------------------|---------------------|------------------------|
| January 02, 20 | 15 | | | | | |
| FORM | 5 | | | | OMB A | PPROVAL |
| | UNIT | TED STATES | S SECURITIES AND EXCHANGE | OMB Number: | 3235-0362 | |
| Check this bo no longer sub | | | Washington, D.C. 20549 | Expires: | January 31, 2005 | |
| to Section 16 Form 4 or Fo 5 obligations may continue See Instruction | rm / | ANNUAL ST | Estimated a burden hou response | average Irs per | | |
| Form 3 Holdi Reported Form 4 Transactions Reported | ings Sectior | | Public Utility Holding Company Act of of the Investment Company Act of 19 | | I | |
| 1. Name and Address of Reporting Person <u>*</u> Hirons Michael L | | | 2. Issuer Name and Ticker or Trading Symbol | 5. Relationship of I Issuer | son(s) to | |
| (Last) | (First) | (Middle) | EPR PROPERTIES [EPR]3. Statement for Issuer's Fiscal Year Ended | (Check | all applicable | 2) |
| | | | (Month/Day/Year) 12/31/2014 | Director X Officer (give below) | title Oth | b Owner er (specify |
| 909 WALNUT, SUITE 200 (Street) | | | | below) rategic Planni | ng | |
| | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | 6. Individual or Joi | int/Group Rep | orting |
| | | | | (check | applicable line |) |
| KANSAS CIT | Y, MOÂ | À 64106 | | X Form Filed by (| ne Reporting P | erson |

X Form Filed by One Reporting Person ____ Form Filed by More than One Reporting Person

| (City) | (State) (Z | Zip) Table | I - Non-Deriv | vative Secu | urities | Acqui | red, Disposed of | f, 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) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) | | 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Shares of Beneficial Interest | 12/22/2014 | Â | G | Amount | or | Price \$ 0 | (Instr. 3 and 4) 49,660 | D | Â |

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

EPR PROPERTIES

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.

SEC 2270 (9-02)

 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. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. of D S B O Ei Is Fi Is (I |
|---|---|---|---|---|---|---------------------|--------------------|-------|--|---|--|
| | | | | | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addre | SS | Relationships | | | | | | |
|--|----------|---------------|-------------------------|-------|--|--|--|--|
| 1 | | 10% Owner | Officer | Other | | | | |
| Hirons Michael L 909 WALNUT SUITE 200 KANSAS CITY, MO 641 | Â 06 | Â | VP - Strategic Planning | Â | | | | |
| Signatures | | | | | | | | |
| /s/ Michael L. 01 Hirons | /02/2015 | | | | | | | |
| <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 provided 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.