## Edgar Filing: BARBIERI ALLEN - Form 4

BARBIERI A	ALLEN												
Form 4													
July 21, 2017	7												
FORM	4									-	PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287					
Check thi if no long										Expires:	January 31,		
subject to	STAT	TEMENT (	OF CHAN				CIAI	LOW	NERSHIP OF	Estimated average burden hours per			
Section 1				SECU	JRI	TIES							
Form 4 or										response	. 0.5		
Form 5 obligatior		<b>.</b>						-	ge Act of 1934,				
may conti	Section.			•		•			f 1935 or Sectio	n			
See Instru	uction	30(ł	n) of the In	vestme	nt (	Company	y Act	of 19	40				
1(b).													
(Print or Type R	(esponses)												
(I fint of Type is	(csponses)												
1. Name and A	ddress of Repor	ting Person *	2 Issuer	· Name a	nd '	Ticker or 7	Fradin	σ	5. Relationship of	f Reporting Per	son(s) to		
BARBIERI ALLEN Symbol CareTru (Last) (First) (Middle) 3. Date of				suer Name <b>and</b> Ticker or Trading				Б	Issuer	1 0			
				areTrust REIT, Inc. [CTRE]									
									(Check all applicable)				
				ate of Earliest Transaction onth/Day/Year)					X Director	109	% Owner		
905 CALLE	AMANECE	R. SUITE	07/20/20	•	)				Officer (give		er (specify		
300		,	01120120	517					below)	below)			
	(Street)		4 If Ame	ndment	Dat	- Original			6 Individual or L	oint/Group Fili	ng(Check		
· · · · · · · · · · · · · · · · · · ·				Amendment, Date Original d(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)				
			1 1100(11101		eur)				_X_ Form filed by				
SAN CLEM	IENTE, CA 9	2673							Form filed by M Person	More than One R	eporting		
		(7:)											
(City)	(State)	(Zip)	Table	e I - Nor	n-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction	Date 2A. D	eemed	3.		4. Securi			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Y	tion Date, if						Securities	Form: Direct	Indirect			
(Instr. 3)		any (Mont	h/Day/Year)	CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially Owned		Beneficial Ownership		
			(insu: 5, 1 and 5)				- )	Following		(Instr. 4)			
									Reported				
							(A)		T ( ( )				
							(A) or		Transaction(s) (Instr. 3 and 4)				
Common				Code	v	Amount 3,552		Price	Transaction(s) (Instr. 3 and 4)				

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

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
L O	Director	10% Owner	Officer	Other				
BARBIERI ALLEN 905 CALLE AMANECER SUITE 300 SAN CLEMENTE, CA 92673	Х							
Signatures								
/s/ William M. Wagner, attorney-in-fact		07/21/20	)17					
**Signature of Reporting Person		Date						
Evaluation of Responses:								

## **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).
- (1) Represents restricted shares of common stock granted to the Reporting Person under the Issuer's non-employee director compensation plan. The shares vest in full on the earlier of June 30, 2018 and the commencement of Issuer's 2018 Annual Meeting of Stockholders.

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.