Edgar Filing: Ettl Robert A. - Form 4

Ettl Robert A Form 4											
April 01, 201	_								OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this if no longe	er								Expires:	January 31,	
subject to Section 16 Form 4 or	5. 5.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Estimated burden hou response	urs per	
Form 5 obligation may conti <i>See</i> Instru- 1(b).	nue. Section 17(a)		ic Uti	lity Hold	ing Com	pany	Act o	ge Act of 1934, if 1935 or Sectic 40	n		
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> Ettl Robert A.			 Issuer Name and Ticker or Trading Symbol Sabra Health Care REIT, Inc. 					5. Relationship of Reporting Person(s) to Issuer			
		BRA]	eann Care	KEII, I	nc.		(Check all applicable)				
				Earliest Tra 19/Year)	nsaction			_X_Director10% Owner Officer (give titleOther (specify			
	HEALTH CARE 18500 VON KAE UITE 550	E 03/2	29/20	-				below)	below)		
				idment, Dat h/Day/Year)	e Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
IRVINE, CA 92612								Form filed by More than One Reporting Person			
(City)	(State) (Z	Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)			3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5))	Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)			
Common Stock	03/29/2019			А	1,284 (1)	А	\$0	26,961 <u>(2)</u>	D		
Common Stock							48,294	I	By The Ettl Family Trust		

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

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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)	ative Conversion (Month/Day/Year) Execu ity or Exercise any		Execution Date, if	Date, if Transaction Code o		5		7. Title and Amount of Underlying Securities (Instr. 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		
Reporting Owners											
	Reporting Owner Name / Address Directo			Relationships or 10% Owner Officer Other							
18500 VC	RA HEALT	ΓΗ CARE REIT, I AN AVENUE, SU	Х								

Signatures

/s/ Harold Andrews, as Attorney-in-Fact 04/01/2019

**Signature of Reporting Person

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).

Date

Represents stock units received by the reporting person in lieu of quarterly director fees pursuant to an election under the Issuer's Non-Employee Directors Stock-For-Fees Program. The units are fully vested and are payable in an equivalent number of shares of the

- (1) Issuer's Common Stock on or within sixty (60) days following the earlier of the reporting person's separation from service or March 29, 2024.
- (2) Consists of 1,310 unvested stock units and 25,651 stock units that have vested but the payment of which has been deferred. Each stock unit represents the right to receive one share of the Issuer's Common Stock.

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.