## Edgar Filing: NATIONWIDE HEALTH PROPERTIES INC - Form 4

NATIONWIDI Form 4 February 10, 20		PROPERT	IES INC									
•									OMB A	PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287					
Check this b if no longer subject to Section 16.		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								January 31, 2005 average Irs per		
Form 4 or Form 5 obligations may continue.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 19400.5I(b).30(h) of the Investment Company Act of 1940												
(Print or Type Res	ponses)											
1. Name and Address of Reporting Person <u>*</u> RUSSELL KEITH P			2. Issuer Name <b>and</b> Ticker or Trading Symbol NATIONWIDE HEALTH PROPERTIES INC [NHP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(M				3. Date of Earliest Transaction (Month/Day/Year) 02/08/2010					X_ Director10% Owner Officer (give titleOther (specify below) below)			
	(Street) 4. If Amendment, Date Original Filed(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>							
NEWPORT B	EACH, CA 9	02660						Person	viore than One Ro	eporting		
(City)	(State)	(Zip)	Table	I - Non-D	erivative S	ecuri	ties Aco	quired, Disposed o	f, or Beneficial	lly Owned		
	2. Transaction D Month/Day/Yea	ar) Executio any	med	3.	4. Securi onAcquired Disposed (Instr. 3,	ties (A) o of (D	r )	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of		
Common Stock (1)	02/08/2010			А	3,000	A	\$0	18,000	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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying ities . 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		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships					
	Director	10% Owner	Officer	Other			
RUSSELL KEITH P 610 NEWPORT CENTER DR NEWPORT BEACH, CA 9266	Х						
Signatures							
/s/ Keith P. 02 Russell 02	2/10/2010						

\*\*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).

Grant of restricted stock units payable solely in NHP common stock. The restricted stock units will vest with respect to 33 1/3% of the (1) units on the first anniversary of the date of grant and each year thereafter so that the units will be fully vested on the third anniversary of the date of grant.

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.