## Edgar Filing: Fox Benjamin N - Form 4

Fox Benjam	in N											
Form 4	• • • •											
January 03, 2												
FORM	14 UNITE	ар статр	SECUE	TTIE	2 4	ND EV	~U л	NCEO	COMMISSION		PPROVAL	
	UNIII	DSIALE				D.C. 20		NGE U		OMB Number:	3235-0287	
Check th			v v et.	singu	<i>,</i>	D.C. 20	547			Expires:	January 31,	
if no longer subject to STATEMENT OF CHAN				<b>GES I</b>	GES IN BENEFICIAL OWN				NERSHIP OF		2005	
Section 1				SECU	SECURITIES					Estimated average burden hours per		
	Form 4 or								response	. 0.5		
Form 5 obligatio		-						-	e Act of 1934,			
may con	tinue. Section		of the In	•		•	· ·		1935 or Section	1		
See Instr 1(b).	uction	50(II)	of the m	vestine	JIII	Compan	y At	101194	0			
1(0).												
(Print or Type ]	Responses)											
		*									<i>.</i> .	
Fox Benjamin N Symbol				ΓΥ INCOME CORP [O]				ıg	5. Relationship of Reporting Person(s) to Issuer			
								1				
			]					(Checl	k all applicable	:)		
(Last) (First) (Middle) 3. Date of (Month/D 11995 EL CAMINO REAL 01/01/20				te of Earliest Transaction					Director	10%	Owner	
				-					_X_ Officer (give title Other (specify below)         below)       below)         EVP, Port. & Asset Mgmt.			
			nendment, Date Original Ionth/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)				
					,	, 			_X_ Form filed by C			
SAN DIEG	O, CA 92130								Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl		n D	orivotivo	Soour	itios A ca	uired, Disposed of	or Bonoficial	ly Ownod	
1 Title of	2 Transaction	Data 24 Daa		3.	II-D			-			•	
1.Title of Security	2. Transaction (Month/Day/Ye	action Date 2A. Deemed Day/Year) Execution Date, if			actio	4. Securi n(A) or Di			5. Amount of Securities	6. Ownership Form: Direct		
(Instr. 3)		any	Code (Instr. 3, 4 and 5)					5)	Beneficially	(D) or	Beneficial	
(Month/Day			Day/Year)	ay/Year) (Instr. 8)					Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
							$(\mathbf{A})$		Reported	(Instr. I)	(mout i)	
							(A) or		Transaction(s)			
~				Code	V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	01/01/2018			F		2,369 (1)	D	\$ 57.02	14,303	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)

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

## **Reporting Owners**

Reporting Owner Name / Addre	dress Relationships							
1 8 8 8 8 8 8 8 8 8 8 8	Director	10% Owner	Officer	Other				
Fox Benjamin N 11995 EL CAMINO REAL SAN DIEGO, CA 92130			EVP, Port. & Asset Mgmt.					
Signatures								
Benjamin N. Fox	01/03/2018							
**Signature of	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).

This amount represents shares automatically withheld upon the vesting of 4,024 restricted shares of common stock on January 1, 2018,(1) which amount is determined based upon the greater of such holder's minimum required tax withholding rate or the highest withholding rate permitted under the rules of the applicable taxing authority for tax withholding.

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.

Reporting Person