## Edgar Filing: QUIGLEY KENNETH K JR - Form 4

| QUIGLEY K<br>Form 4<br>July 19, 2017   | KENNETH K JR   |                |                              |  |           |                 |   |  |   |  |  |
|--|--|----------------|------------------------------|--|-----------|-----------------|---|--|---|--|--|
| FORM   |  |                |                              |  |           |                 |   | OMB AP   | PROVAL  |  |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 |  |                |                              |  |           |                 | OMB<br>Number:  | 3235-0287  |   |  |  |
| Check this box<br>if no longer CTLATENCENTE OF CHLAN                           |  |                |                              |  |           |                 |   | Expires:   | January 31,<br>2005   |  |  |
| subject to STATEMENT OF CHAN   |  |                |                              | GES IN BENEFICIAL OWNERS   |           |                 |   | Estimated average  |   |  |  |
| Section 1  |  |                |                              |  |           |                 | burden hours per  |  |   |  |  |
| Form 4 or<br>Form 5  |  |                |                              |  |           |                 | response  | 0.5  |   |  |  |
| obligation   | Form 5<br>obligations<br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section |                |                              |  |           |                 |   |  |   |  |  |
| may cont<br><i>See</i> Instru<br>1(b).   | inue.  | 30(h) of the   | •                            |  |           |                 |   |  |   |  |  |
| (Print or Type F   | Responses)   |                |                              |  |           |                 |   |  |   |  |  |
| QUIGLEY KENNETH K JR Symbol  |  |                | 1                            | 8  |           |                 | 5. Relationship of Reporting Person(s) to<br>ssuer<br>(Check all applicable)  |  |   |  |  |
| (Last)   | (First) (M   | liddle) 3. Dat | of Earliest T                | f Earliest Transaction   |           |                 |   |  |   |  |  |
| 3499 ROUT  | E 9 NORTH, SU  |                | n/Day/Year)<br>/2017         |  |           | _               | X Director<br>Officer (give ti<br>low)  |  | Owner<br>r (specify   |  |  |
|  |  |                | mendment, D<br>Ionth/Day/Yea | nth/Day/Year) A  |           |                 | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person                     |  |   |  |  |
| FREEHOLI   | D, NJ 07728  |                |                              |  |           | _               | _ Form filed by Mo<br>_ Form filed by Mo<br>rson  |  |   |  |  |
| (City)   | (State) (  | Zip) T         | able I - Non-                | Derivative S   | ecuriti   | ies Acquir      | ed, Disposed of,  | or Beneficiall   | y Owned   |  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction Date<br>(Month/Day/Year)  |                | 3.<br>if Transact<br>Code    | Transaction Disposed of (D)<br>Code (Instr. 3, 4 and 5)<br>(Instr. 8)<br>(A) |           | uired (A)<br>D) | <ul> <li>A) 5. Amount of<br/>Securities<br/>Beneficially<br/>Owned<br/>Following<br/>Reported<br/>Transaction(s)</li> </ul> | 6.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
| LINALI   |  |                | Code V                       | Amount   | or<br>(D) | Price           | (Instr. 3 and 4)  |  |   |  |  |
| UMH<br>Properties,<br>Inc.   | 07/17/2017   |                | Р                            | 62.9921  | А         | \$<br>15.875    | 2,090.098 (1)   | <u>)</u> 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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, |                     | ate                | Amou<br>Under<br>Secur | le and<br>ant of<br>rlying<br>ities<br>. 3 and 4) | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|--|--|---------------------|--------------------|------------------------|---|---|---|
|   |   |   | Code V                                 | 4, and 5)<br>(A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title                  | Amount<br>or<br>Number<br>of<br>Shares            |   |   |

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## **Reporting Owners**

| Reporting Owner Name / Address   | Relationships |           |         |       |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|
| 1.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0                                      | Director      | 10% Owner | Officer | Other |  |  |  |
| QUIGLEY KENNETH K JR<br>3499 ROUTE 9 NORTH<br>SUITE 3C<br>FREEHOLD, NJ 07728 | Х             |           |         |       |  |  |  |
| Signatures   |               |           |         |       |  |  |  |
| Nelli V. Madden 07/  | 17/2017       |           |         |       |  |  |  |

\*\*Signature of

Date

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).

(1) Includes 62.9921 shares purchased through the Dividend Reinvestment and Stock Purchase Plan on 7/17/2017.

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.