

KHOURY ABDO H
Form 4
February 19, 2010

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
KHOURY ABDO H

2. Issuer Name and Ticker or Trading Symbol
NATIONWIDE HEALTH PROPERTIES INC [NHP]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
610 NEWPORT CENTER DRIVE,
SUITE 1150

(Street)

3. Date of Earliest Transaction
(Month/Day/Year)
01/30/2010

____ Director
 Officer (give title below)
____ 10% Owner
____ Other (specify below)
EVP, CFO, Chief Portfolio Off.

NEWPORT BEACH, CA 92660

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
____ Form filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Indirect Ownership (Instr. 4)
				Code V	Amount or Price (A) or (D)		
Common Stock ⁽¹⁾	01/30/2010			M	453.271 D \$ 33.28	D	
Common Stock ⁽²⁾	01/30/2010			F	3,748.369 D \$ 33.28	D	
Common Stock						I	Trust

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Security (Instr. 3 and 4)
Stock Appreciation Rights ⁽¹⁾	\$ 33.28	01/30/2010		M	8,028.369	01/30/2010 01/30/2010	Common Stock

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

KHOURY ABDO H
610 NEWPORT CENTER DRIVE, SUITE 1150
NEWPORT BEACH, CA 92660

EVP, CFO, Chief Portfolio Off.

Signatures

/s/ Abdo H. Khoury 02/19/2010

**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).
 - (1) An aggregate of 8,028.369 shares were issued in settlement of an award of stock appreciation rights (SARs). Acquisitions of an aggregate of 8,481.64 shares were previously credited and reported as dividend equivalents relating to the SARs. As a result of a decline in the fair market value of the common stock between the grant date and the payment date of the SARs, the aggregate number of shares issued at settlement was less than the number previously credited as dividend equivalents. This difference is reflected in this report as a disposition.
 - (2) Shares withheld to cover tax withholding due in connection with the vesting of the SARs.

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.