## Edgar Filing: STAG Industrial, Inc. - Form 4

STAG Indust	trial, Inc.										
Form 4											
January 15, 2	2014										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB AF	OMB APPROVAL			
	Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287		
Check thi if no long subject to Section 14 Form 4 or Form 5 obligatior may conti <i>See</i> Instru	6. Filed pu Section 17	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							Expires: January 31 200 Estimated average burden hours per response 0.		
1(b).											
(Print or Type R	Responses)										
1. Name and Address of Reporting Person _2. IssuerWEGER HANS SSymbol							5. Relationship of Reporting Person(s) to Issuer				
				G Industrial, Inc. [STAG]				(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction			(Chech	k an applicable	)	
(Month/E C/O STAG INDUSTRIAL, INC., 99 01/15/2 HIGH STREET, 28TH FLOOR			2014 —			X Director Officer (give below)	title 10% Owner Other (specify below)				
nigh stre		<b>OK</b>									
			endment, Date Original			6. Individual or Joint/Group Filing(Check					
Filed(Mor BOSTON, MA 02110				•				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)									
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
2				Code V	Amount	or (D)	Price \$	(Instr. 3 and 4)			
Common Stock	01/15/2014			Р	613	А	20.36 (1)	14,313	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)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	Securities Acquired (A) or Disposed of (D) (Instr. 3,	5	Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code	4, and 5) V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## Edgar Filing: STAG Industrial, Inc. - Form 4

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
Toportung of the read of the top	Director	10% Owner	Officer	Other				
WEGER HANS S C/O STAG INDUSTRIAL, INC. 99 HIGH STREET, 28TH FLOOR BOSTON, MA 02110	Х							
Signatures								
/s/ Kathryn Arnone, Attorney-in-Fact	01/	/15/2014						
**Signature of Reporting Person		Date						
Explanation of Responses:								

## υμ

- \* 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).
- The shares were issued to the reporting person pursuant to the STAG Industrial, Inc.'s 2011 Equity Incentive Plan in lieu of quarterly fees (1) of \$12,500 for the reporting person's services as a director. The shares were valued at the average closing price of the shares for the 10-day period ended January 10, 2014, which was \$20.36.

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.