## Edgar Filing: Hedstrom Mark M. - Form 4

| Form 4   |  |          |  |   |              |        |                      |  |  |   |  |
|--|--|----------|--|---|--------------|--------|----------------------|--|--|---|--|
| March 21, 2  | ЛЛ   |          |  |   |              |        |                      |  | OMB A  | PPROVAL   |  |
|  | UNITEL   | ) STATES |  | RITIES A<br>shington  |              |        | ANGE C               | OMMISSION  | OMB<br>Number:   | 3235-0287   |  |
| Check th<br>if no lon<br>subject t<br>Section<br>Form 4 c  | s box<br>er STATEMENT OF CHANGES IN BENEFICIA<br>5. SECURITIES |          |  |   |              |        | AL OWN               | ERSHIP OF  | Expires:<br>Estimated a<br>burden hou<br>response            |   |  |
| Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b).<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<br>30(h) of the Investment Company Act of 1940 |  |          |  |   |              |        |                      |  |  |   |  |
| (Print or Type)  | Responses)   |          |  |   |              |        |                      |  |  |   |  |
| 1. Name and Address of Reporting Person <u>*</u><br>Hedstrom Mark M.   |  |          | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>Colony Financial, Inc. [CNLY] |   |              |        | 8                    | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)  |  |   |  |
| (Last) (First) (Middle)<br>C/O COLONY FINANCIAL,<br>INC., 2450 BROADWAY, 6TH<br>FLOOR  |  |          | 3. Date of Earliest Transaction<br>(Month/Day/Year)<br>03/19/2012                      |   |              |        |                      | Director 10% Owner<br>X Officer (give title Other (specify<br>below) below)<br>Vice President  |  |   |  |
|  |  |          |  | lonth/Day/Year)   |              |        |                      | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person<br>Form filed by More than One Reporting |  |   |  |
|  | ONICA, CA 904  |          |  |   |              |        |                      | Person   | ore than One Re  | porting   |  |
| (City)   | (State)  | (Zip)    | Tab  | le I - Non-   | Derivativo   | e Secu | rities Acqu          | ired, Disposed of,   | or Beneficial  | ly Owned  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | curity (Month/Day/Year) Execution Date, if                     |          |  | 3. 4. Securities Acquired (A)<br>Transaction Disposed of (D)<br>Code (Instr. 3, 4 and 5)<br>(Instr. 8)<br>(A) |              |        |                      | Securities<br>Beneficially<br>Owned<br>Following<br>Reported   | 6.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |  |          |  | Code V  | Amount       | or     | Price<br>\$          | Transaction(s) (Instr. 3 and 4)  | (Instr. 4)   |   |  |
| Common<br>Stock  | 03/19/2012   |          |  | S   | 3,094<br>(1) | D      | \$<br>17.0153<br>(2) | 52,517   | 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) | 3A. Deemed<br>Execution Date, if<br>any<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, | ;                   | Date               | Under<br>Secur | unt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<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 |           |                   |       |  |  |  |
|--|---------------|-----------|-------------------|-------|--|--|--|
|  | Director      | 10% Owner | Officer           | Other |  |  |  |
| Hedstrom Mark M.<br>C/O COLONY FINANCIAL, INC.<br>2450 BROADWAY, 6TH FLOOR<br>SANTA MONICA, CA 90404 |               |           | Vice<br>President |       |  |  |  |
| Signatures   |               |           |                   |       |  |  |  |
| /s/ David A. Palame, as<br>Attorney-in-fact  | 03            | 3/21/2012 |                   |       |  |  |  |
| **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).
- The disposition represents the sale of common stock to fund the payment of federal income taxes incurred by the reporting person in (1) connection with the vesting of restricted common stock.

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$16.92 to \$17.12, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the

(2) Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

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.