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SIMON PROPERTY GROUP INC /DE/ Form 5 F

| February 17 | , 2015 | | | | | | | | | |
|--|---|-------------------|--|---|---|--|--|--|----------------------|--|
| FORM | 15 | | | | | | | OMB AI | PPROVAL | |
| | RITIES AND EXCHANGE COMMISSION | | | | | OMB Number: | 3235-0362 | | | |
| Check thi no longer | | shington, D | shington, D.C. 20549 | | | | | January 31 | | |
| ANNUAL STATEMENT OF CHANGES IN BENEFICIAI S obligations may continue. See Instruction 1(b). ANNUAL STATEMENT OF CHANGES IN BENEFICIAI OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1 | | | | | | Expires: 200 Estimated average burden hours per response 1. | | | | |
| 1(b). Form 3 H Reported Form 4 Transactio Reported | oldings Section 17(a | | tility Holdin | g Compa | ny A | ct of | 1935 or Sectio | n | | |
| SMITH J ALBERT JR Sy SI | | | 2. Issuer Name and Ticker or Trading Symbol SIMON PROPERTY GROUP INC /DE/ [SPG] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | (First) (M | (Month/I | (Month/Day/Year) | | | | X Director Officer (give below) | title 00% below) | Owner er (specify | |
| 1 EAST OF | HO STREET, IN1 | | 011 | | | | | | | |
| | | | f Amendment, Date Original vd(Month/Day/Year) | | | | 6. Individual or Joint/Group Reporting | | | |
| | | | | | | | (chec | k applicable line) |) | |
| INDIANAF | POLIS, IN 4620 |)4 | | | | | _X_ Form Filed by Form Filed by I Person | One Reporting P More than One R | | |
| (City) | (State) (| Zip) Tab | le I - Non-Deri | vative Sec | uritie | s Acqu | iired, Disposed of | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed | 3. Transaction Code | 4. Securi Acquired Disposed (Instr. 3, | . Securities .cquired (A) or bisposed of (D) instr. 3, 4 and 5) (A) or .mount (D) Price | | 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or | 7. Nature of | |
| Common Stock | Â | Â | Â | Â | Â | Â | 34,402 <u>(1)</u> (2) | D | Â | |
| Reminder: Rer | port on a separate line t | for each class of | Persons wh | o respon | d to t | the co | llection of info | mation | SEC 227(| |

R securities beneficially owned directly or indirectly.

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)

(9-02)

| 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. 6. Date Expiration of (Month/D) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | /Year) Under Secur | | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. of D So Ei Is Fi (I |
|---|---|---|---|---|--|---------------------|-----------------------|-------|--|---|---|
| | | | | | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| | Relationships | | | | | |
|---|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| SMITH J ALBERT JR 1 EAST OHIO STREET, IN1-0175 INDIANAPOLIS, IN 46204 | X | Â | Â | Â | | |
| Signatures | | | | | | |

J. Albert Smith, Jr., and his attorney-in-fact, James M. Barkley

**Signature of Reporting Person

Date

02/17/2015

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 1,052 common shares added to the reporting person's account under the Company's Deferred Compensation Plan in connection with the Washington Prime Group spin-off.
- (2) Includes 401 common shares acquired through the reinvestment of dividends received on common shares awarded under the Company's Stock Incentive Plan.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.