## Edgar Filing: STOCKERT DAVID P - Form 4

STOCKERT	DAVID P										
Form 4											
January 20, 2	005										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							т	OMB APPROVAL			
Washington, D.C. 20549							OMB Number:	3235-0287			
Check thi if no long							Expires:	January 31, 2005			
subject to STATEMENT OF (						CIA	LOW	NERSHIP OF	Estimated a		
Section 1		SECURITIES						burden hou	burden hours per		
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5	
obligation	<sup>18</sup> Section 1			· · /			•	of 1935 or Sectio	m		
may conti <i>See</i> Instru	nue.		of the Inv	•	•	- ·			/11		
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(Print or Type R	esponses)										
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1. Name and Address of Reporting Person <u>*</u> STOCKERT DAVID P			2. Issuer Name <b>and</b> Ticker or Trading				g	5. Relationship of Reporting Person(s) to Issuer			
STOCKERT DAVID I			Symbol POST PROPERTIES INC [PPS]								
		<b>AC</b> 1 <b>U</b> \					<b>י</b> ן	(Cheo	ck all applicable	e)	
(Last)	(First)	(Middle)		Earliest Tra	ansaction			X Director	100	6 Owner	
4401 NORTHSIDE			(Month/Day/Year) 01/18/2005					X_ Officer (give		er (specify	
	, SUITE 800		01,10,20	,00				below)	below) sident and CEO		
	(Streat)		4 10 4	1 ( D )							
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check Applicable Line)			
			Filed(Month/Day/Year)					_X_ Form filed by One Reporting Person			
ATLANTA,	GA 30327-30	)57						Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)									
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction I							5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Ye	any any	ion Date, if TransactionAcquired (A) or Code Disposed of (D)						Form: Direct (D) or	Beneficial	
			/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Owned	Indirect (I)	Ownership	
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	01/10/2005						\$ 0	101 (50.0)	D		
Stock	01/18/2005			А	5,380	А	(1)	121,650.06	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)

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Stock Option (right to buy)	\$ 32.53	01/18/2005		А	50,000	01/18/2006(2)	01/18/2015	Common Stock	50,000

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
STOCKERT DAVID P 4401 NORTHSIDE PARKWAY SUITE 800 ATLANTA, GA 30327-3057	Х		President and CEO				
Signatures							
/s/ Sherry W. Cohen (as attorney- Stockert)	01/20/2005						

<u>\*\*</u>Signature of 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) Restricted stock under the company's 2003 Incentive Stock Plan. Restricted stock vests one-third each year over a three year period beginning on 12/31/2005.
- (2) Options vest one-third each year over a three year period beginning on 01/18/2006.

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.

Date