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Miller Miche	lle Lynn						
Form 4							
August 06, 2	018				OMB APPROVAL		
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION						
Check thi	UNITED	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					
if no long	or						
subject to Section 16.			ANGES IN BENEFICIAL OW SECURITIES	Estimated average burden hours per			
Form 4 or Form 5				A (61004	response 0.5		
obligation	•		n 16(a) of the Securities Exchange				
may conti	inue.		Utility Holding Company Act of Investment Company Act of 19		1		
See Instru 1(b).	iction	50(ii) of the	investment company rict of 19	10			
(Print or Type R	Responses)						
Miller Michelle Lynn Symbol NAT			suer Name and Ticker or Trading ol	5. Relationship of Reporting Person(s) to Issuer			
			IONAL RETAIL PERTIES, INC. [NNN]	(Check all applicable)			
(Last)	(First) (M		e of Earliest Transaction	Director X Officer (give	title 10% Owner		
450 S. ORA	NGE AVE., SUI		h/Day/Year) 3/2018	below)	below) of Accounting Officer		
(Street) 4. If At			mendment, Date Original	6. Individual or Joint/Group Filing(Check			
		Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by O Form filed by M	ne Reporting Person ore than One Reporting		
ORLANDO	, FL 32801			Person	ore than one Reporting		
(City)	(State)	(Zip) T	able I - Non-Derivative Securities Ac	quired, Disposed of,	or Beneficially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Ye	Code (Instr. 3, 4 and 5) ar) (Instr. 8) (A)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)		
G			Or Code V Amount (D) Price	(Instr. 3 and 4)			
Common Stock	08/03/2018	08/03/2018	S 1,750 D ^{\$} 45.67	29,947	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)	4. Transact Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,	5	Date	Amou Under Secur	le and unt of rlying rities (1, 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
		Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	1	Relationships					
1	Director	10% Owner	Officer	Other			
Miller Michelle Lynn 450 S. ORANGE AVE. SUITE 900 ORLANDO, FL 32801			EVP & Chief Accounting Officer				
Signatures							
\s\ Michelle Lynn Miller	08/06/2018	3					
**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).

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.