MONMOUTH Form 4 April 16, 2014	I REAL ESTATE	E INVEST	MENT (CORP							
FORM	Л								OMB AF	PROVAL	
	UNITED S	FATES S			D EXCH		E CO	MMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to STATEMENT OF CHANG				GES IN BENEFICIAL OWNERSHIP OF					Expires: January 31, 2005 Estimated average		
Section 16. Form 4 or			2	SECURI	LIES				burden hours per		
Form 5 obligations	Section 17(a)						•	Act of 1934, 935 or Section	response	0.5	
may contin <i>See</i> Instruct 1(b).	ue.			•	ompany A						
(Print or Type Re	sponses)										
1. Name and Address of Reporting Person *2. Issuer NameMiller Kevin S.Symbol								5. Relationship of Reporting Person(s) to Issuer			
					AL ESTA DRP [MNI			(Check	all applicable)	
(Last)		(N	Month/Day		saction			Director _X Officer (give t		Owner r (specify	
3499 ROUTE	9 NORTH, SUI	$\mathbf{TE} \mathbf{3C} = 0$	4/15/201	4				Chief F	inancial Office	er	
(Street) 4. If Amend Filed(Month			h/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
FREEHOLD,	NJ 07728						_	K_ Form filed by Or _ Form filed by Mo erson			
(City)	(State) (Z	ip)	Table I	- Non-Der	rivative Secu	urities	Acquir	ed, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		n Date, if	3. Transactic Code (Instr. 8)	4. Securitie on(A) or Disp (Instr. 3, 4)	osed o	of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Monmouth				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Real Estate Investment Corporation	04/15/2014			Р	58.3049	A	\$ 9.38	11,546.293 (1)	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.

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 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Miller Kevin S. 3499 ROUTE 9 NORTH, SUITE 3C FREEHOLD, NJ 07728			Chief Financial Officer				
Signatures							

Susan M. Jordan	04/16/2014
<u>**</u> 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).
- (1) Includes purchase of 58.3049 shares through the Dividend Reinvestment and Stock Purchase Plan on 4/15//2014.

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.