Edgar Filing: GOULD MATTHEW J - Form 4

| GOULD MA | ATTHEW J | | | | | | | | | |
|---|---|--------------------|----------|---|---|--|---|---|--|--|
| Form 4 March 19, 20 | 009 | | | | | | | | | |
| FORN | ЛЛ | | | | | | NT. | APPROVAL | | |
| | UNITED S | IAIES SI | | ITIES AND EXC hington, D.C. 205 | | COMMISSIO | N OMB Number: | 3235-0287 | | |
| Check this box if no longer subject to Section 16. Form 4 or | | | | GES IN BENEFIC SECURITIES | Expires: Estimated burden h response | | | | | |
| Form 5 obligatio may cont <i>See</i> Instru 1(b). | ns finue. Section 17(a |) of the Pub | olic Uti | 5(a) of the Securitie lity Holding Comp vestment Company | pany Act o | of 1935 or Secti | | | | |
| (Print or Type I | Responses) | | | | | | | | | |
| 1. Name and A GOULD M. | Address of Reporting P ATTHEW J | Sy | mbol | Name and Ticker or T ALTY TRUST [B | - | 5. Relationship Issuer | of Reporting P | Person(s) to | | |
| (Last) | (First) (M | | | Earliest Transaction | KIJ | (Ch | eck all applica | ble) | | |
| (Last) (First) (Middle) 3. Date of (Month/J 60 CUTTER MILL ROAD, SUITE 03/20/2 303 | | | | ay/Year) | | Director 10% Owner X_Officer (give title Other (specify below) SENIOR VICE PRESIDENT | | | | |
| | (Street) | | | dment, Date Original h/Day/Year) | | 6. Individual or Applicable Line) _X_ Form filed by | | Person | | |
| GREAT NE | ECK, NY 11021 | | | | | Person | wore man one | Reporting | | |
| (City) | (State) (2 | Zip) | Table | I - Non-Derivative S | ecurities Ac | quired, Disposed | of, or Benefic | ially Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution D any | Date, if | 3. 4. Securiti TransactionAcquired Code Disposed (Instr. 8) (Instr. 3, 4) Code V Amount | (A) or of (D) and 5) (A) or | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Shares of Beneficial Interest | | | | | | 244,182 <u>(1)</u> (2) | D | | | |
| Shares of Beneficial Interest | | | | | | 17,241 <u>(3)</u> | I | As custodian | | |
| Shares of Beneficial Interest | | | | | | 30,048 <u>(4)</u> | I | By corporation | | |
| Shares of | | | | | | 39,500 <u>(5)</u> | Ι | By spouse | | |

Beneficial

Interest

| Shares of Beneficial Interest | | | | | | 26,951 <u>(6)</u> | I | By trust |
|-------------------------------------|------------|---|-------|---|------|----------------------|---|------------------------|
| Shares of Beneficial Interest | | | | | | 200 (7) | I | By children |
| Shares of Beneficial Interest | | | | | | 19,018 <u>(8)</u> | I | By foundation |
| Shares of Beneficial Interest | 03/17/2009 | А | 3,000 | А | \$ 3 | 2,189,282 <u>(9)</u> | Ι | By limited partnership |
| Shares of Beneficial Interest | 03/18/2009 | А | 100 | Α | \$ 3 | 2,189,382 <u>(9)</u> | I | By limited partnership |

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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | Amou Under Secur | le and unt of rlying ities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu 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

Director 10% Owner Officer

Other

SENIOR VICE PRESIDENT

Relationships

GOULD MATTHEW J 60 CUTTER MILL ROAD, SUITE 303 GREAT NECK, NY 11021

Signatures

Matthew J. Gould

03/20/2009

<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) Total includes shares owned by IRA of reporting person and shares owned by money purchase pension plan.
- (2) Includes 1,000 shares of issuer which will be issued effective as of February 2, 2009 if the issuer's shareholders approve the adoption of a new incentive plan at the shareholders' meeting scheduled in March 2009.
- (3) Reporting person holds these shares as custodian for his children. Reporting person disclaims any beneficial interest in these shares.
- (4) Reporting person is a senior vice president of One Liberty Properties, Inc., the corporation which owns these shares.
- (5) Reporting person disclaims any beneficial interest in these shares.
- (6) These shares are owned by a family trust of which reporting person is a trustee.
- (7) These shares are owned by children of reporting person who reside with reporting person. Reporting person disclaims any beneficial interest in these shares.
- (8) These shares are owned by a charitable foundation of which reporting person is a director.

These shares are owned by Gould Investors L.P. Reporting person is president of the corporate managing general partner of Gould **D** Investors L.P. These shares represent all shares of issuer owned by

(9) Investors L.P., and he holds limited partnership interests in Gould Investors L.P. These shares represent all shares of issuer owned by Gould Investors L.P.

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.