Edgar Filing: SALVATI MICHAEL - Form 4

SALVATI M	ICHAEL											
Form 4												
April 04, 201	2											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
	UNIII	ED STATES		ITIES Al hington,			NGE (COMMISSION	OMB Number:	3235-0287		
Check this				0 /					Expires:	January 31,		
if no longe subject to	er STAT	EMENT O	F CHAN	GES IN H	BENEFI	CIA	LOW	NERSHIP OF		Estimated average		
	Section 16. SECURITIES							burden hou				
Form 4 or	Form 4 or							response 0.5				
Form 5	Filed	pursuant to	Section 16	(a) of the	e Securit	ies Ez	xchang	ge Act of 1934,	·			
obligation may conti		17(a) of the	Public Uti	ility Hold	ing Com	ipany	Act o	of 1935 or Sectio	n			
See Instru		30(h)) of the Inv	vestment	Compan	y Act	of 19	40				
1(b).												
(Print or Type R	esponses)											
1. Name and Ad	dress of Report	ting Person *	2 1	N	T: -1	T J		5 Relationship of	Reporting Person(s) to			
SALVATI N		2. Issuer Name and Ticker or Trading Symbol Apollo Commercial Real Estate				5. Relationship of Reporting Person(s) to Issuer						
	•					(Check all applicable)						
	Finance, Inc. [ARI]				-							
(T)		AC 1 U >		_	-			V D'	100			
				3. Date of Earliest Transaction				X_ Director 10% Owner Officer (give title Other (specify				
				(Month/Day/Year) 04/02/2012				below) below)				
MANAGEM			04/02/20	12								
57TH STRE												
57111511CL		2001	4 10 4	1 (D (0.1.1				·	(61 1		
				4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mont	h/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
NEW YORK	X NY 10019							Form filed by M				
	,							Person				
(City)	(State)	(Zip)	Table	I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction	Date 2A. Dec	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Y	(ear) Executi						Securities	Form: Direct			
(Instr. 3) any			(D (V)	Code Disposed of (D) /Year) (Instr. 8) (Instr. 3, 4 and 5)			Beneficially		Beneficial			
		(Month	/Day/Year)	(Instr. 8)	(Instr. 3,	4 and	5)	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
						(• >		Reported	(Insu: I)	(instr. i)		
						(A) or		Transaction(s)				
				Code V	Amount		Price	(Instr. 3 and 4)				
Common	04/02/2012						\$0	16 700	D			
Stock	04/02/2012			А	2,396	А	(1)	16,788	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)	4. Transactic Code (Instr. 8)	5. orNumber 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 Secu Bene Owna 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				
SALVATI MICHAEL C/O APOLLO GLOBAL MANAGEMEN' 9 WEST 57TH STREET, 43RD FLOOR NEW YORK, NY 10019	r, llc _X							
Signatures								
/s/ Jessica Lomm, as Attorney-in-Fact	04/04/2012							
**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) The Issuer granted these shares to Mr. Salvati pursuant to the Issuer's 2009 Equity Incentive Plan.

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.