## Edgar Filing: POST PROPERTIES INC - Form 4

| POST PROPI   | ERTIES INC             |               |                                 |   |  |  |   |  |                       |                         |  |
|--|------------------------|---------------|---------------------------------|---|--|--|---|--|-----------------------|-------------------------|--|
| Form 4   |                        |               |                                 |   |  |  |   |  |                       |                         |  |
| January 03, 2  | 008                    |               |                                 |   |  |  |   |  |                       |                         |  |
| FORM   | <b>4</b>               |               | C CECUD                         |   |  |  |   | COMMERCION                                       | -                     | PPROVAL                 |  |
| Washington, D.C. 20549                                     |                        |               |                                 |   |  |  | OMB<br>Number:                            | 3235-0287  |                       |                         |  |
| Check this box<br>if no longer                             |                        |               |                                 |   |  |  |   |  | Expires:              | January 31,<br>2005     |  |
| subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF |                        |               |                                 |   |  | Estimated a  |   |  |                       |                         |  |
| Section 16. SECURITIES<br>Form 4 or                        |                        |               |                                 |   |  | burden hou<br>response                                     | irs per                                   |  |                       |                         |  |
| Form 5   |                        | pursuant to   | Section 16                      | b(a) of the                                 | e Securiti                                       | es Ez  | kchan                                     | ge Act of 1934,                                  | 16300136              | 0.0                     |  |
| obligation   | <sup>s</sup> Section 1 | •             |                                 |   |  |  |   | of 1935 or Sectio                                | n                     |                         |  |
| may contin<br>See Instru                                   |                        | 30(h          | ) of the Inv                    | vestment                                    | Company  | y Act  | of 19                                     | 40   |                       |                         |  |
| 1(b).  |                        |               |                                 |   |  |  |   |  |                       |                         |  |
| (Print or Type R   | (searonces)            |               |                                 |   |  |  |   |  |                       |                         |  |
| (I find of Type K  | esponses)              |               |                                 |   |  |  |   |  |                       |                         |  |
| 1. Name and Address of Reporting Person <u></u> 2.1        |                        |               |                                 | 2. Issuer Name <b>and</b> Ticker or Trading |  |  |   | 5. Relationship of Reporting Person(s) to        |                       |                         |  |
| BLOOM HERSCHEL M   |                        |               | Symbol                          | e e e e e e e e e e e e e e e e e e e       |  |  |   | Issuer   |                       |                         |  |
|  |                        |               | POST P                          | POST PROPERTIES INC [PPS]                   |  |  |   | (Check all applicable)                           |                       |                         |  |
| (Last)   | (First)                | (Middle)      | 3. Date of Earliest Transaction |   |  |  |   | к ан аррнсаов                                    | <i>c)</i>             |                         |  |
|  |                        |               | (Month/D                        | (Month/Day/Year)                            |  |  |   | X_ Director 10% Owner                            |                       |                         |  |
|  |                        |               | 12/31/20                        | 12/31/2007                                  |  |  |   | Officer (give title Other (specify below) below) |                       |                         |  |
| PARKWAY  | , SUITE 800            |               |                                 |   |  |  |   | ,  | ,                     |                         |  |
| (Street) 4   |                        |               |                                 | 4. If Amendment, Date Original              |  |  | 6. Individual or Joint/Group Filing(Check |  |                       |                         |  |
| Filed(Month/Day/Year)                                      |                        |               |                                 |   |  | Applicable Line)<br>_X_ Form filed by One Reporting Person |   |  |                       |                         |  |
| ATLANTA,   | GA 30327-30            | 057           |                                 |   |  |  |   |  | Aore than One Re      |                         |  |
| (City)   | (State)                | (Zip)         | Table                           | e I - Non-De                                | erivative S                                      | Securi   | ties Ac                                   | quired, Disposed o                               | f, or Beneficial      | lly Owned               |  |
| 1.Title of   | 2. Transaction         | Date 2A. De   |                                 | 3.  | 4. Securi  |  |   | 5. Amount of                                     | 6. Ownership          | 7. Nature of            |  |
| Security   | (Month/Day/Y           | ear) Execut   | ion Date, if                    | Transactio                                  | -  |  |   | Securities                                       | Form: Direct          | Indirect                |  |
| (Instr. 3)   |                        | any<br>(Month | /Day/Year)                      |   | CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5) |  |   | · · · ·  | D) or<br>indirect (I) | Beneficial<br>Ownership |  |
|  |                        | (Ivionu       | (Day Tear)                      | (Instr. 6)                                  | (111501. 5,                                      | + anu  | 5)  | Following  | (Instr. 4)            | (Instr. 4)              |  |
|  |                        |               |                                 |   |  | (A)  |   | Reported   |                       |                         |  |
|  |                        |               |                                 |   |  | or   |   | Transaction(s)<br>(Instr. 3 and 4)               |                       |                         |  |
| Community  |                        |               |                                 | Code V                                      | Amount   | (D)  | Price                                     |  |                       |                         |  |
| Common<br>Stock  | 12/31/2007             |               |                                 | А   | 1,708  | А  | \$ 0<br>(1)                               | 15,612.77  | 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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) | 5                   |                    | Amou<br>Under<br>Secur | le and<br>ant of<br>rlying<br>ities<br>. 3 and 4) | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|--|---|---------------------|--------------------|------------------------|---|---|--|
|   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title                  | Amount<br>or<br>Number<br>of<br>Shares            |   |  |

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## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>   | Relationships |           |         |       |  |  |  |  |
|---|---------------|-----------|---------|-------|--|--|--|--|
|   | Director      | 10% Owner | Officer | Other |  |  |  |  |
| BLOOM HERSCHEL M<br>4401 NORTHSIDE PARKWAY<br>SUITE 800<br>ATLANTA, GA 30327-3057 | Х             |           |         |       |  |  |  |  |
| Signatures  |               |           |         |       |  |  |  |  |
| /s/ Sherry Cohen, Power of Attorney   | (             |           |         |       |  |  |  |  |
| <u>**</u> Signature of Reporting Person   |               | Date      |         |       |  |  |  |  |
| Evaluation of Poenoncoe:  |               |           |         |       |  |  |  |  |

## **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 awarded under the company's 2003 Incentive Stock Plan. Restricted stock vests one-third each year over a three year period beginning on 12/31/2008.

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.