## Edgar Filing: KROPP JAMES H - Form 4/A

| KROPP JAME<br>Form 4/A   | SH                                      |   |   |            |   |   |   |   |  |
|--|---|---|---|------------|---|---|---|---|--|
| October 03, 200  | )8                                      |   |   |            |   |   |   |   |  |
| FORM 4   | 4                                       |   |   |            |   |   | OMB AF  | PROVAL  |  |
| UNITED STATES SECURITIES AND EXCHANGE COMMISSION<br>Washington, D.C. 20549       |   |   |   |            |   | COMMISSION  | OMB<br>Number:  | 3235-0287   |  |
| Check this b<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5 | S                                       | F CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES<br>Section 16(a) of the Securities Exchange Act of 1934, |   |            |   | Expires:January 312005Estimated averageburden hours perresponse0.5                                      |   |   |  |
| obligations<br>may continu<br><i>See</i> Instructi<br>1(b).                      | e. Section 17(a) of                     | of the Public Utili<br>30(h) of the Inve  | ty Holdin   | g Comp     | any Act of                                | 1935 or Section   |   |   |  |
| (Print or Type Resp  | ponses)                                 |   |   |            |   |   |   |   |  |
| 1. Name and Address of Reporting Person <u>*</u><br>KROPP JAMES H                |   | Symbol<br>PS BUSIN  | Symbol<br>PS BUSINESS PARKS INC/CA                                    |            |   | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                           |   |   |  |
| (Last)   | (First) (Midd                           |   | [PSB]<br>3. Date of Earliest Transaction                              |            |   | X Director  | 10%   | Owner   |  |
| C/O PS BUSIN   | · · · ·                                 | (Month/Day 10/02/200  | /Year)  |            |   | Officer (give t<br>below)   |   | or (specify   |  |
|  | (Street)                                |   | 4. If Amendment, Date Original<br>Filed(Month/Day/Year)<br>10/02/2008 |            |   | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person |   |   |  |
| GLENDALE,  | CA 91201-2349                           |   | -   |            |   | Form filed by Me<br>Person  | ore than One Re                                       | porting   |  |
| (City)   | (State) (Zip                            | ) Table I   | - Non-Der   | ivative Se | curities Acq                              | uired, Disposed of,   | or Beneficial   | ly Owned  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction Date<br>(Month/Day/Year) | tion Date 2A. Deemed<br>ay/Year) Execution Date, if<br>any<br>(Month/Day/Year)                              |   |            | ties Acquire<br>isposed of (I<br>4 and 5) | ) Securities<br>Beneficially<br>Owned<br>Following  | 6.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Depositary<br>Shares   |   |   | Code V  | Amount     | (A)<br>or<br>(D) Pric                     | Reported<br>Transaction(s)<br>(Instr. 3 and 4)  | (I)<br>(Instr. 4)                                     |   |  |
| Representing<br>Series P<br>Preferred<br>Stock                                   | 10/02/2008                              |   | Р   | 1,000      | A <sup>\$</sup><br>17.3                   | 8 1,000   | Ι   | by IRA (1)  |  |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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#### 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) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<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) | ;                   | Date               | Amou<br>Under<br>Secur | rlying                                 | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<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 |   |   |

# **Reporting Owners**

| <b>Reporting Owner Name / Address</b>   | Relationships |            |         |       |  |  |  |
|---|---------------|------------|---------|-------|--|--|--|
|   | Director      | 10% Owner  | Officer | Other |  |  |  |
| KROPP JAMES H<br>C/O PS BUSINESS PARKS, INC.<br>701 WESTERN AVENUE<br>GLENDALE, CA 91201-2349 | Х             |            |         |       |  |  |  |
| Signatures  |               |            |         |       |  |  |  |
| /s/ Stephanie G. Heim, Attorney<br>in Fact  |               | 10/03/2008 |         |       |  |  |  |
| **Signature of Reporting Person   |               | Date       |         |       |  |  |  |
| Explanation of Responses:   |               |            |         |       |  |  |  |

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\* 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) By a custodian of an IRA for benefit of the reporting person; incorrectly reported on original filing.

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.