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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

| hours per response: | 0.5 |
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| Estimated average burden | |

| 1. Name and Addi Patten Mark | 1 0 | Person* | 2. Issuer Name and Ticker or Trading Symbol <u>CONSOLIDATED TOMOKA LAND CO</u> [CTO] | | ationship of Reporting Pe (all applicable) Director Officer (give title below) | erson(s) to Issuer 10% Owner Other (specify below) | |
|---------------------------------|----------|---------|--|-----------------------|---|---|--|
| 1500 CODNEDCTONE DIVED CTE 100 | | () | 3. Date of Earliest Transaction (Month/Day/Year) 01/22/2015 | | Sr.VP & CFO | | |
| (Street) DAYTONA BEACH | FL 32117 | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indi Line) X | vidual or Joint/Group Filing (Check Applical Form filed by One Reporting Person Form filed by More than One Reporting Person | | |
| (City) | (State) | (Zip) | | | FEISUI | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | | | Securities Beneficially | Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|-------------------------|---|--------|---------------|---------|------------------------------------|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130.4) |
| Common Stock | 01/22/2015 | | M ⁽¹⁾ | | 700 | Α | \$56.05 | 15,300 | D | |

 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) | 4. Transa Code (8) | | of | | 6. Date Exerc Expiration Da (Month/Day/\ | ate | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|-----|-----|--|--------------------|--|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Restricted Share Grant | (1) | 01/22/2015 | | С | | | 700 | (1) | 01/22/2017 | Common Stock | 700 | (1) | 1,400 ⁽¹⁾ | D | |

Explanation of Responses:

1. on 1/22/14 the reporting person was awarded 2,100 shares of restricted common stock of the issuer, one-third of which would vest and become unrestricted on each of the first, second and third anniversaries of the award date, provided the reporting person is an employee of the issuer on such dates. The first one-third vested and became unrestricted on 1/22/15, the fair market value of which on such date was \$56.05 per share.



** Signature of Reporting Person Date

01/23/2015

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

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.