## Edgar Filing: HFF, Inc. - Form 4

| HFF, Inc.<br>Form 4  |   |                           |   |  |                         |  |  |  |   |  |  |
|--|---|---------------------------|---|--|-------------------------|--|--|--|---|--|--|
| June 07, 200   | )7                                      |                           |   |  |                         |  |  |  |   |  |  |
| FORM   | ЛД                                      |                           |   |  |                         |  |  |  | APPROVAL  |  |  |
| UNITED STATES SECURITIES AND EXCHANGE COMMISSIO<br>Washington, D.C. 20549  |   |                           |   |  |                         |  |  | N OMB<br>Number:   | 3235-0287   |  |  |
| Check th<br>if no lon<br>subject t   | states states                           | AENT OF                   | OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES                     |  |                         |  |  |  | January 31,<br>2005<br>average                                    |  |  |
| Section 16.SECURITIESburden hours per<br>response0.5Form 4 orFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934,0.5Form 5Filed pursuant to Section 16(a) of the Public Utility Holding Company Act of 1935 or Section0.5See Instruction30(h) of the Investment Company Act of 19401940 |   |                           |   |  |                         |  |  |  | -   |  |  |
| (Print or Type   | Responses)                              |                           |   |  |                         |  |  |  |   |  |  |
| 1. Name and Address of Reporting Person <u>*</u><br>Kukral John Z  |   |                           | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>HFF, Inc. [HF] |  |                         | r Trading                                  | 5. Relationship of Reporting Person(s) to Issuer   |  |   |  |  |
| (Last)   | (Last) (First) (Middle)                 |                           |   | of Earliest T                                    | ransaction              | L  | (Check all applicable)   |  |   |  |  |
|  | NC., ONE OXFO<br>301 GRANT STI          |                           |   | Day/Year)  |                         |  | X Director<br>Officer (giv<br>below)   |  | % Owner<br>her (specify   |  |  |
| (Street) 4. If Amendment<br>Filed(Month/Day/   |   |                           |   |  | (Year) Applicable Line) |  |  |  | oint/Group Filing(Check<br>One Reporting Person                   |  |  |
| PITTSBUR   | RGH, PA 15219                           |                           |   |  |                         |  |  | More than One F  |   |  |  |
| (City)   | (State)                                 | (Zip)                     | Tab   | ole I - Non-l                                    | Derivative              | e Securities A                             | cquired, Disposed  | of, or Beneficia   | ally Owned  |  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction Date<br>(Month/Day/Year) | Execution any             | Date, if  | 3.<br>Transactio<br>Code<br>(Instr. 8)<br>Code V | Disposed<br>(Instr. 3,  | l (A) or<br>l of (D)                       | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
| Reminder: Rep  | port on a separate line                 | e for each cla            | ass of sec  | urities bene                                     | ficially ow             | ned directly                               | or indirectly.   |  |   |  |  |
|  |   |                           |   |  | inforı<br>requi         | nation cont<br>red to respe<br>ays a curre | spond to the colle<br>tained in this forn<br>ond unless the fo<br>ntly valid OMB co                                | n are not<br>rm  | SEC 1474<br>(9-02)  |  |  |
|  | Tab                                     |                           |   |  |                         | sposed of, or<br>convertible s             | Beneficially Owner<br>securities)  | d  |   |  |  |
|  |   | action Date<br>/Day/Year) |   |  | 4.<br>Transact          | 5. Number<br>tionof Derivati               | 6. Date Exercisative Expiration Date   |  | 7. Title and Amount of 8<br>Underlying Securities                 |  |  |

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| Security<br>(Instr. 3) | or Exercise<br>Price of<br>Derivative<br>Security |            | any<br>(Month/Day/Year) | Code<br>(Instr. 8) | Securities<br>Acquired<br>(A) or<br>Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) |     | (Month/Day/Year)    |                    | (Instr. 3 and 4)  |  |
|------------------------|---|------------|-------------------------|--------------------|---|-----|---------------------|--------------------|---|--|
|                        |   |            |                         | Code V             | (A)   | (D) | Date<br>Exercisable | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>Shares |
| Stock<br>Option        | \$ 15.3   | 06/05/2007 |                         | A                  | 1,171   |     | 06/05/2010          | 06/05/2017         | Shares of<br>Class A<br>Common<br>Stock, par<br>value<br>\$.01 per<br>share |  |

## **Reporting Owners**

|  |            | Relationships |         |       |  |  |  |  |
|--|------------|---------------|---------|-------|--|--|--|--|
| Reporting Owner Name / Address   | Director   | 10%<br>Owner  | Officer | Other |  |  |  |  |
| Kukral John Z<br>C/O HFF, INC., ONE OXFORD CENTRE<br>301 GRANT STREET, SUITE 600<br>PITTSBURGH, PA 15219 | , X        |               |         |       |  |  |  |  |
| Signatures   |            |               |         |       |  |  |  |  |
| /s/ Eric O. Conrad, as attorney-in-fact  | 06/07/2007 |               |         |       |  |  |  |  |
| **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).

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.

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