FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | OVAL | | | | | |
|------------------------|-----------|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | |
| Estimated average burd | en | | | | | |
| hours per response: | 0.5 | | | | | |

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

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

| 1. Name an | RE7 | 2. Issuer Name and Ticker or Trading Symbol RETAIL OPPORTUNITY INVESTMENTS CORP [ROIC] | | | | | | | | | 5. Relationship of Report (Check all applicable) X Director | | | ng Pe | 10% C | Owner | | | | |
|--|---|--|--|---------|----------------------------------|---|------|--|--|-------|---|---|------|---------------------|--|------------------------------------|---|---------------|--|---|
| (Last) C/O RET CORP. | C/O RETAIL OPPORTUNITY INVESTMENTS | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/22/2017 | | | | | | | | | | belov | er (give title v) | | Otner below) | (specify) |
| 8905 TOWNE CENTRE DRIVE, SUITE 108 (Street) SAN DIEGO CA 92122 | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| (City) | | (State) (Zip) | | | | | | | | | | | | | | Person | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date | | | 3. Transaction Code (Instr. r) 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | 1 and Securit | | es ially Following | Form (D) o | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A (D | or) | Price | | Transaction(s) (Instr. 3 and 4) | | | | (1130.4) |
| Common | 2017 | .017 | | A | | 938(1) | A \$ | | \$0 | | 49,863 | | D | | | | | | | |
| Common Stock, par value \$0.0001 per share | | | | | | | | | | | | | | | | 20,000 | | | | See footnote ⁽²⁾ |
| | | Та | | | | | | | | | sed of, onvertib | | | | y Ow | ned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | n Date, | 4. Transact Code (In 8) | ion str. | n of | | 6. Date E Expiratio (Month/D | n Dat | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | , | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code V | | (A) | | Date Exercisa | | Expiration Date | Title | or | ount nber res | | | | | | |

Explanation of Responses:

- 1. The reporting person was granted 938 shares of restricted Common Stock that were issued pursuant to the Retail Opportunity Investments Corp. 2009 Equity Incentive Plan. All of such shares vest on January 1, 2018.
- 2. These shares are held by Edward H. Meyer Revocable Trust DTD 12/28/05 of which Mr. Meyer is the Trustee.

/s/ Edward H. Meyer

** Signature of Reporting Person Date

02/24/2017

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.