Edgar Filing: Physicians Realty Trust - Form 4

Physicians Re Form 4	•										
July 26, 2013	1							-	PPROVAL		
Check this	UNITEDS	STATES SECU Wa	RITIES A ushington,			NGE (COMMISSION	OMB Number:	3235-0287		
if no long subject to Section 16 Form 4 or Form 5 obligation may conti	er STATEM 5. Filed purs	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section							January 31, 2005 average irs per 0.5		
<i>See</i> Instru 1(b).	ction	30(h) of the I	nvestment	Compan	y Aci	1 01 194	+0				
(Print or Type R	esponses)										
Anderson Stanton D. Symbol			er Name and ians Realty			-	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (M	(First) (Middle) 3. Date of H					(Check all applicable)10% Owner				
(Month/Day250 EAST WISCONSIN07/24/201AVENUE, SUITE 190007/24/201							Officer (give title Other (specify below) below)				
(Street) 4. If Amen Filed(Mont				-			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
	EE, WI 53202	7 .)					Person				
(City)			ole I - Non-D 3.				uired, Disposed of	f , or Beneficia l 6. Ownership	-		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2. Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year)			ispose 4 and (A)	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Form: Direct (D) or Indirect (I) (Instr. 4)			
Common shares of beneficial	07/24/2013		Code V P	Amount 8,695		Price \$	(Instr. 3 and 4) 8 695	D			
interest, \$0.01 par value per sh				0,070		11.5					
Common shares of beneficial interest, \$0.01 par value per sh	07/24/2013		A	8,696 (1)	A	\$ 0	17,391	D			

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	T . 1	or		
						Exercisable Date	• ·	Title Number of			
				<u> </u>							
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
Treforming Comment and Comments	Director	10% Owner	Officer	Other			
Anderson Stanton D. 250 EAST WISCONSIN AVENUE SUITE 1900 MILWAUKEE, WI 53202	Х						
Signatures							
/s/ Alex K. Tinucci, as attorney-in-fact	07/	26/2013					
** 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).
- (1) Represents an initial grant of restricted common shares that will vest ratably on July 24, 2014, July 24, 2015 and July 24, 2016, provided the Reporting Person is providing services to the Issuer or a subsidiary of the Issuer each vesting date.

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.