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Piedmont Office Realty Trust, Inc. Form 4 February 13, 2015

February 13,	, 2015												
FORM	14										APPROVA	۹L	
	UNITED	STATES				ND EX D.C. 2(ANGE (COMMISSIO	N OMB Number:	3235	-0287	
Check th if no long	oer.									Expires:	Janua	ry 31, 2005	
subject to Section 1 Form 4 c	statement of changes in Beneficial Ownership of on 16. SECURITIES					Estimated burden h	Estimated average burden hours per response 0						
Form 5 obligatio may cont <i>See</i> Instr 1(b).	ns Section 17(a) of the I		Itility H	old	ling Coi	npan	y Act o	ge Act of 1934, f 1935 or Secti 40	on			
(Print or Type l	Responses)												
1. Name and A Swope Jeffr	Address of Reporting ey L.	Person <u>*</u>	Symbol			Ticker or		-	5. Relationship o Issuer	of Reporting P	erson(s) to		
			Piedmont Office Realty Trust, Inc. [PDM]						(Check all applicable)				
(Last)	Middle)	3. Date of Earliest Transaction (Month/Day/Year)						_X_ Director 10% Owner Officer (give title Other (specify below) below)					
11695 JOH PARKWAY			02/11/2	2015									
	(Street)		4. If Ame Filed(Mo			-	ıl		6. Individual or Applicable Line) _X_ Form filed by Form filed by		Person		
JOHNS CR	EEK, GA 30097								Person	wore than one	Reporting		
(City)	(State)	(Zip)	Tab	le I - No	n-D	erivative	Secu	rities Aco	quired, Disposed	of, or Benefic	ially Owne	d	
1.Title of Security (Instr. 3)	ecurity (Month/Day/Year) Execution		n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8) (A) or					d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect Beneficial Ownershi (Instr. 4)	1	
Common Stock	02/11/2015			Р			A	\$ 18.58	16,400	I	By Champi Operatin Partners II, Ltd.	ng	
Common Stock									6,000	Ι	By Champi Associa Ltd.		

17,390

D

Reporting Owners

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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		4.	5.	6. Date Exer		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	· · · · ·		orNumber	Expiration D		Amou		Derivative	Deriv
Security	or Exercise		any	Code	of D · · ·	(Month/Day/	Year)	Under		Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ			Securi		(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		
							Б		or		
							Expiration	Title Num of	Number		
						Exercisable	Exercisable Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
1 3 1 1 1 1	Director	10% Owner	Officer	Other				
Swope Jeffrey L. 11695 JOHNS CREEK PARKWAY STE. 350 JOHNS CREEK, GA 30097	Х							
Signatures								
/s/ Laura P. Moon as Attorney-in-Fact Swope	02	02/13/2015						

**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.