Physicians Realty Trust Form 4 July 26, 2013

### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box if no longer subject to Section 16.

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

OF Estimate

Estimated average burden hours per

OMB

Number:

response...

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

Form 4 or Form 5 obligations may continue. See Instruction

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 30(h) of the Investment Company Act of 1940

1(b).

\$0.01 par value per sh

Common shares of beneficial

interest, \$0.01 par value per sh 07/24/2013

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading BLACK ALBERT JR Issuer Symbol Physicians Realty Trust [DOC] (Check all applicable) (First) (Middle) (Last) 3. Date of Earliest Transaction (Month/Day/Year) X\_ Director 10% Owner Officer (give title Other (specify 250 EAST WISCONSIN 07/24/2013 below) **AVENUE, SUITE 1900** 4. If Amendment, Date Original (Street) 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting MILWAUKEE, WI 53202 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction(A) or Disposed of Securities Form: Direct Indirect (Instr. 3) Code (D) Beneficially (D) or Beneficial (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price Common shares of beneficial 07/24/2013 P D interest,

8,696

A

\$0

13,043

D

1

#### Edgar Filing: Physicians Realty Trust - Form 4

Common shares of beneficial 07/24/2013 interest. \$0.01 par

value per sh

4,347 A \$ 17,390

Shares owned by spouse (2)

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

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SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Conversion Security or Exercise (Instr. 3) Price of Derivative Security

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if (Month/Day/Year)

5. TransactionNumber Code of (Instr. 8) Derivative Securities

**Expiration Date** (Month/Day/Year) Acquired (A) or Disposed of (D)

(Instr. 3, 4, and 5) 6. Date Exercisable and 7. Title and Amount of Underlying Securities (Instr. 3 and 4) 8. Price of Derivative Security (Instr. 5)

Follo Repo Trans (Insti

9. Nu

Deriv

Secu

Bene

Own

Amount Date Expiration Title Number Exercisable Date of

Code V (A) (D) Shares

## **Reporting Owners**

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

BLACK ALBERT JR 250 EAST WISCONSIN AVENUE **SUITE 1900** MILWAUKEE, WI 53202

X

**Signatures** 

/s/ Alex K. Tinucci, as attorney-in-fact

07/26/2013

\*\*Signature of Reporting Person

Date

Reporting Owners 2

### **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.
- (2) The Reporting Person disclaims ownership of these securities, and this report shall not be deemed an admission that the Reporting Person is the beneficial ownership of such securities for purposes of Section 16 or otherwise.

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.