Che

FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549	
vvasimigton,	D.C.	20343	

ck this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
ion 16. Form 4 or Form 5	
ations may continue. See	

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

Instructi	on 1(b).			Filed		it to Section tion 30(h) d						1934			<u> </u>			
1. Name and Address of Reporting Person* <u>Crate Darrell W</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol  Easterly Government Properties, Inc. [ DEA ]								5. Relationship of Reporting Person(s) to Issu (Check all applicable)  X Director 10% Ow					
(Last)	(F	First)	(Middle)										X	Officer (give title Other (spe below) below)				pecify
C/O EASTERLY GOVERNMENT PROPERTIES, INC.					3. Date of Earliest Transaction (Month/Day/Year) 12/19/2019										Chai	irman	l	
2101 L S	TREET N	W, SUITE 650		-	4. If Amendment, Date of Original Filed (Month/Day/Year)							. Individual or Joint/Group Filing (Check Applicable						
(Street) WASHIN	GTON D	OC .	20037										ine) X	,				
(City)	(5	State)	(Zip)															
		Tab	ole I - Non-D	Derivat	ive S	ecurities	s Ac	quired,	Dis	posed o	f, or Be	nefici	ally (	Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			ate	2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr.   5)				ed (A) or str. 3, 4 a	) or 5. Amount Securities Beneficial Owned Fo Reported		Form (D) or ollowing (I) (In:		Direct Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amount	(A) o (D)	Price	Trar		action(s) . 3 and 4)			(IIISti. 4)	
		-	Table II - De (e.			curities <i>i</i>								wned				
Derivative Conversion or Exercise (Month/Day/Year) Execution Date, if any		Cod	ansaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Amof Securities Underlying Derivative Sect (Instr. 3 and 4)				ties ig e Securit	De Se (In	Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	is illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
												or Number						

## **Explanation of Responses:**

1. Represents LTIP Units in Easterly Government Properties LP (the "Operating Partnership"), of which the Issuer is the general partner, granted pursuant to the Issuer's 2015 Equity Incentive Plan. The LTIP Units, and the common units of limited partnership interest in the Operating Partnership (each, a "Common Unit") into which such LTIP Units may be converted, are subject to certain restrictions on transfer for a three-year period as set forth in the applicable award agreement.

Date (D)

23,125

Exercisable

Expiration Date

Title

Stock

2. Conditioned upon minimum allocations to the capital accounts of the LTIP Units for federal income tax purposes, each LTIP Unit may be converted, at the election of the holder, into a Common Unit. Each Common Unit acquired upon conversion of an LTIP Unit may be presented for redemption, at the election of the holder, for cash equal to the fair market value of a share of the Issuer's Common Stock, except that the Issuer may, at its election, acquire each Common Unit so presented for one share of Common Stock. The rights to convert vested LTIP Units into Common Units and redeem Common Units do not have expiration dates.

## Remarks:

LTIP

Units<sup>(1)</sup>

/s/ Alison M. Bernard, Attorney-in-fact for Darrell W. Crate

\*\* Signature of Reporting Person Date

of Shares

23,125

\$0.00

23,125

D

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).

12/19/2019

\*\* 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.