FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|---------------|------|-------|
| vvasilington, | D.C. | 20040 |

| STATEMENT | OF CHANGES | S IN BENEFICIAL | OWNERSHIP |
|------------------|-------------------|-----------------|------------------|

| l | OMB APPROVAL | | | | | | | | |
|---|--------------------------|-----|--|--|--|--|--|--|--|
| l | OMB Number: 3235-0287 | | | | | | | | |
| l | Estimated average burden | | | | | | | | |
| l | 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 and Address of Reporting Person* Freeman Scott D. (Last) (First) (Middle) C/O EASTERLY GOVERNMENT PROPERTIES, INC. 2101 L STREET NW, SUITE 650 (Street) WASHINGTON DC 20037 | | | | | | Susuer Name and Ticker or Trading Symbol Easterly Government Properties, Inc. [DEA] 3. Date of Earliest Transaction (Month/Day/Year) 05/11/2020 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | (Chec | ' | | | | pplicable | |
|---|--|--|------------------|---|-------------------------|--|-----|---|------------------|--|--------------------|--|---|----------|-----------------------------------|---|-----|--|---------------------------------------|
| (City) | (S | tate) (Z | <u>Z</u> ip) | | | | | | | | | | | | Perso | in - | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | Execution if any | | ition Date, Transaction | | | | | | 3, 4 and Securi | | rities Fo ficially (D d Following (I) | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or Pi | rice | Transa (Instr. 3 | ction(s) | | | (111301.4) |
| Common Stock ⁽¹⁾ 05/11/2 | | | | 2020 | | | A | | 3,805 | Α | . 4 | \$0.00 | 3,805 | | | D | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution if any | A. Deemed kecution Date, any Ionth/Day/Year) | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | | | 9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4) | y G | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code V | | (A) | | Date Exercisa | able | Expiration Date | Title | or Numb of Share | per | | | | | |

Explanation of Responses:

1. Represents shares of common stock granted under the Issuer's 2015 Equity Incentive Plan, as amended, which will vest upon the earlier of the first anniversary of the date of grant or the next annual stockholder meeting, subject to the Reporting Person's continued service as a director of the Issuer through such date.

Remarks:

/s/ Alison M. Bernard,

Attorney-in-fact for Scott D. 05/13/2020

<u>Freeman</u>

** Signature of Reporting Person Date

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.

 $Persons \ who \ respond \ to \ the \ collection \ of \ information \ contained \ in \ this \ form \ are \ not \ required \ to \ respond \ unless \ the \ form \ displays \ a \ currently \ valid \ OMB \ Number.$