FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	OMB APP	ROVAL
EMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-02

Check this box if no longer subject to	STATE
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

OMB APPROVAL								
OMB Number: 3235-028								
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hours per response:	0.5							

					or	Secti	on 30(h) (	of the	Investmer	it Coi	mpany Act	of 1940							
1. Name and Address of Reporting Person* <u>Baivier Meghan G.</u>				2. Issuer Name <b>and</b> Ticker or Trading Symbol  Easterly Government Properties, Inc. [ DEA ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owne						
(Last)		(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)							_		X Officer (give title below) Other (specification)  EVP, CFO & COO					
INC.					12/19/2019														
2101 L S	1 L STREET NW, SUITE 650				4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) WASHIN	NGTON 1	DC	20037													led by Mor		orting Person One Repor	
(City)	(	(State)	(Zip)																
		Tal	ble I - No	n-Deriv	ative	e Se	curities	s Ac	quired,	Dis	posed o	f, or E	Beneficia	ally O	wned	l			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				eay/Year) Exe		A. Deemed xecution Date, any Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,		4 and Secur Benef		ficially ed Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									v	Amount	(A) (D)	or Price	,  т	Transaction(s) (Instr. 3 and 4)				(111511. 4)	
			Table II -								osed of, convertil				ned				
1. Title of Derivative Security (Instr. 3)  2. Conver or Exer Price o Derivat Securit			3A. Deeme Execution if any (Month/Day	Date, T	Code (Insti				6. Date Ex Expiration (Month/Da	n Date	e	7. Title and Ame of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivativ Security			e (Control of the Control of the Con	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				c	Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amoun or Numbe of Shares						
LTIP												Commo	m						

## **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.

18,257

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:

Units<sup>(1)</sup>

/s/ Alison M. Bernard, Attorney-in-fact for Meghan G. 12/23/2019 **Baivier** 

\*\* Signature of Reporting Person Date

18,257

Stock

\$0.00

18,257

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.