Edgar Filing: Mifsud Anthony - Form 4/A

Mifsud Anth Form 4/A	-										
March 21, 2019 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). MUNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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								Simple3235-028Number:January 31Expires:200Estimated averageburden hours perresponse0.			
(Print or Type F	Responses)										
(2. Issuer Name and Ticker or Trading Symbol CORPORATE OFFICE PROPERTIES TRUST [OFC]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(N			(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 03/01/2019				Director 10% Owner Officer (give title Other (specify below) below) EVP and CFO			
Filed(M				Amendment, Date Original (Month/Day/Year) 15/2019				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
(City)	(State)	(Zip)	Tabl	e I - Non-D	orivativo	Socur	ities Aca	Person	or Bonoficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any		3. Transactio Code	4. Securi	ties A spose	cquired d of (D)	Owned Indirect (I) O		7. Nature of	
Common Shares	03/01/2019			Code V F	Amount 943	(D) D	Price \$ 25.99	(instr. 5 and 4) 53,972	D		
Common Shares	03/01/2019			F	784	D	(1) \$ 25.99 (1)	53,188	D		
Common Shares	03/01/2019			F	1,337	D	\$ 25.99 (1)	51,851	D		

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Profit Interest Units	<u>(2)</u>	03/01/2019		А	10,663 (<u>3)</u>	(2)(4)	(2)(4)	Common Shares	10,663	\$

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Mifsud Anthony 6711 COLUMBIA GATEWAY DRIVE SUITE 300 COLUMBIA, MD 21046			EVP and CFO			
Signatures						
David L. Finch, by Power of Attorney	03/21/2	2019				
**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).
- (1) These shares were forfeited in a net share settlement in connection with restrictions lapsing on restricted shares.

Each Profit Interest Unit will convert automatically into one share of beneficial interest, designated as a unit (an "OP Unit"), in Corporate Office Properties, L.P. when such Profit Interest Unit becomes vested and upon equalization of its capital account balance.

- (2) OP Units are redeemable for cash, or, at the option of Corporate Office Properties Trust, exchangeable for common shares of Corporate Office Properties Trust, currently on a one-for-one basis.
- (3) Represents Profit Interest Units issued pursuant to the Corporate Office Properties Trust 2017 Omnibus Equity and Incentive Plan.
- (4) The Profit Interest Units will vest in three equal installments over a three-year period.

Remarks:

This form amends the report to (i) remove an award of securities erroneously reported as restricted shares on Table I and update

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.