## Edgar Filing: Equity Commonwealth - Form 4

Equity Commonwealth Form 4 August 10, 2015 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).							OMB Number: Expires: Estimated a burden hour response			
(Print or Type R 1. Name and A MARKMAN (Last) C/O EQUIT COMMONY NORTH RIV SUITE 600	ddress of Report V ADAM SC (First) Y VEALTH, T	OTT (Middle) WO	Symbol Equity C	•	ealth [E		g	Director X Officer (give below)	k all applicable	
CHICAGO,	(Street) IL 60606		4. If Amendment, Date Original Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting Person</li> </ul>			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Acqu	uired, Disposed of	, or Beneficial	y Owned
1.Title of Security (Instr. 3)	2. Transactior (Month/Day/Y	any	emed on Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	4. Securi on(A) or D (Instr. 3, Amount	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Shares of Beneficial Interest	08/10/2015			Р	4,500	A	\$ 27.21 (1)	83,855	Ι	See footnote $(2)$

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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships					
r of the term	Director	10% Owner	Officer	Other			
MARKMAN ADAM SCOTT C/O EQUITY COMMONWEALTH TWO NORTH RIVERSIDE PLAZA, SUIT CHICAGO, IL 60606	E 600		EVP & CFO				
Signatures							
/s/ Orrin S. Shifrin, attorney-in-fact 08	/10/2015						

Date

\*\*Signature of Reporting Person

## **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).

The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$27.18 to \$27.26, inclusive. The reporting person undertakes to provide to Equity Commonwealth, any security holder of Equity

- (1) S27.18 to \$27.20, inclusive. The reporting person undertakes to provide to Equity Commonwealth, any security holder of Equity Commonwealth, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote (1).
- (2) These shares are held by The Adam and Sarah Markman Trust, of which the reporting person is the co-trustee and a beneficiary.

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.