EDELMAN MARTIN L Form 4

June 21, 2018

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Check this box if no longer

subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

10% Owner

Other (specify

0.5

OMB APPROVAL

Estimated average burden hours per

response...

Form 5 obligations may continue.

See Instruction

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

2. Issuer Name and Ticker or Trading

Equity Commonwealth [EQC]

3. Date of Earliest Transaction

(Month/Day/Year)

06/20/2018

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * EDELMAN MARTIN L

(First) (Middle)

C/O EQUITY COMMONWEALTH, TWO NORTH RIVERSIDE PLAZA, **SUITE 2100**

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Issuer

below)

X_ Director

Officer (give title

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

5. Relationship of Reporting Person(s) to

(Check all applicable)

CHICAGO, IL 60606

(City) 1.Title of

Security

(Instr. 3)

(State)

(Month/Day/Year)

(Zip)

2. Transaction Date 2A. Deemed

Execution Date, if

(Month/Day/Year)

Symbol

3. 4. Securities TransactionAcquired (A) or Code

Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

Code V Amount (D) Price

5. Amount of Securities Beneficially Owned Following Reported

6. Ownership Form: Direct (D) or Indirect Beneficial (Instr. 4)

7. Nature of Indirect Ownership (Instr. 4)

(A)

Transaction(s) (Instr. 3 and 4)

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

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SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Number		6. Date Exercisable and		7. Title and Amount of		8. Price	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction Derivative		Expiration Date		Underlying Securities		Deriva	
Security	or Exercise		any	Code Securities		(Month/Day/Year)		(Instr. 3 and 4)		Securit	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Acquired						(Instr.
	Derivative				(A) or						
	Security				Disposed of						
					(D)						
					(Instr. 3,	4,					
					and 5)						
				Code V	I (A)	(D)	Data	Evaluation	Title	Amayınt	
				Code	V (A)	(D)	Date	Expiration	Title	Amount	
							Exercisable	Date		or	
										Number	
										of	
										Shares	
LTIP									Common		
Units	<u>(1)</u>	06/20/2018		$A^{(2)}$	3,200		(1)(2)	(1)(2)	Shares	3,200	\$ 0.2
Units									Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

EDELMAN MARTIN L C/O EQUITY COMMONWEALTH TWO NORTH RIVERSIDE PLAZA, SUITE 2100 CHICAGO, IL 60606



Signatures

/s/ Orrin S. Shifrin, attorney-in-fact

06/21/2018

**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).
 - Each LTIP Unit will convert automatically into one share of beneficial interest, designated as a unit (an "OP Unit") of EQC Operating Trust when the LTIP Unit becomes vested and upon equalization of its capital account with the per-unit capital account of the OP Units.
- OP Units are redeemable for cash or, at the option of Equity Commonwealth, exchangeable for common shares of Equity Commonwealth on a one-for-one basis.
- (2) Represents LTIP Units issued pursuant to the Equity Commonwealth 2015 Omnibus Incentive Plan. The LTIP Units will vest on 6/20/2019

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.

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