# FORM 4

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

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)												
Name and Address of Reporting Person * Busch Jeffrey				2. Issuer Name and Ticker or Trading Symbol Global Medical REIT Inc. [GMRE]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner				
(Last) (First) (Middle) 2 BETHESDA METRO CENTER, SUITE 440			3. Date of Earliest Transaction (Month/Day/Year) 03/12/2018						X Officer (give title below) Other (specify below)  Chairman, President and CEO					
(Street) BETHESDA, MD 20814				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City) (State) (Zip)			Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)		f Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)		of (D)	D) Beneficially Owned Following Reported Transaction(s)		Collowing (s)	Ownership Form: of Be	Beneficial	
				(Month/Day/Year	Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	: 3 and 4)		\ /	Ownership (Instr. 4)
Common	Stock		03/12/2018		P		2,000	A	\$ 7.12	24,740			D	
Common	Stock		03/13/2018		P		2,000	A	\$ 7.06	26,740			D	
Common	Stock		03/13/2018		P		2,000	A	\$ 7.2	28,740			D	
Reminder:	Report on a s	separate line fo	r each class of secur	ties beneficially o		Pers	ons who	respo this fo	rm are	not requ		ormation spond unle trol numbe	ss	1474 (9-02)
				Derivative Securites, puts, calls, w						ly Owned				
Derivative Conversion Da		ercise (Month/Day/Year) any (Month/Day/Y		4. Transaction Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exerci and Expiration (Month/Day/Y		piration Date Am /Day/Year) Und Sec		ount of derlying surities str. 3 and Derivative Security (Instr. 5)		Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownersl Form of Derivati Security Direct (I or Indire	Beneficia Ownershi (Instr. 4)
				Code V	(A) (D)	Date Exe		Expiratio Date	n Title	Amount or Number of Shares				

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address		10% Owner	Officer	Other		
Busch Jeffrey 2 BETHESDA METRO CENTER, SUITE 440 BETHESDA, MD 20814	X		Chairman, President and CEO			

#### **Signatures**

/s/ Jeffrey Busch	03/13/2018

**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).

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.