FORM	4
------	---

Г

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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

(Fint of Type Responses)										
1. Name and Address of Reporting Persor Barber Jamie Allen	2. Issuer Name and Ticker or Trading Symbol Global Medical REIT Inc. [GMRE]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
4800 MONTGOMERY LANE, S		3. Date of Earliest Transaction (Month/Day/Year) 05/08/2017					X_Officer (give title below)Other (specify below) _			
(Street) BETHESDA, MD 20814		4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquire					ired, Disposed of, or Beneficially Ov	vned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if Code (A) or Disposed of (D)		Transaction(s)	Ownership	7. Nature of Indirect Beneficial				
		(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)

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

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 control number.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

						•	
(e.g., puts,	calls, wa	arrants,	options,	conve	ertible se	curities)	

	(e.g., puts, cans, warrants, options, convertible securities)														
1. Title of			3A. Deemed	4.		5. Num		6. Date Exer		7. Title and				10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	of		and Expirati	on Date	of Underlyin	ıg	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Derivat	ive	(Month/Day	/Year)	Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of	· · ·	(Month/Day/Year)	(Instr. 8))	Securiti	ies	```		(Instr. 3 and	4)	(Instr. 5)	Beneficially	Derivative	Ownership
Ì.	Derivative		Ì Í	. ,		Acquire	Acquired		`	ĺ.	` ´	Owned	Security:	(Instr. 4)	
	Security					(A) or								Direct (D)	
	~					Dispose	ьч						0	or Indirect	
						of (D)	cu						Transaction(s)		
						(Instr. 3	2 /							(Instr. 4)	
						and 5)	, 4 ,						(11150. 4)	(11150.4)	
						and 5)									
											Amount				
								Dete	E distriction		or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code	v	(A)	(D)				Shares				
				coue		()	(2)				Shares				
LTIP		0.5.100.100.1.5				5,230		(2)	(2)	Common		\$ \$		-	
Unit (1)	<u>(2)</u>	05/08/2017		A		(3)		(2)	(2)	Stock	5,230	\$ 0	5,230	D	
Unit 🛄						131				STOCK					

Reporting Owners

	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Barber Jamie Allen 4800 MONTGOMERY LANE SUITE 450 BETHESDA, MD 20814			Secretary and General Counsel	

Signatures

Jamie A. Barber	05/08/2017
**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).

(2) As described in the OP's partnership agreement, vested LTIP Units may be exchanged at any time after vesting, subject to certain conditions, for cash or, at the election of the Issuer, for shares of Common Stock on a one-for-one basis. LTIP Units have no expiration date.

(3) LTIP Units vest in equal one-third installments on May 8 of 2018, 2019 and 2020.

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.

⁽¹⁾ Represents units of limited partnership interest ("LTIP Units") in Global Medical REIT L.P. (the "OP"), the operating partnership of the Issuer.