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

OMB APPRO	/AL
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hours per response	0.5

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 Kesponses	- /													
1. Name and Address of Reporting Person* Barber Jamie Allen				2. Issuer Name and Ticker or Trading Symbol Global Medical REIT Inc. [GMRE]						5. I	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 2 BETHESDA METRO CENTER, SUITE 440				3. Date of Earliest Transaction (Month/Day/Year) 07/09/2020					X	X Officer (give title below) Other (specify below)  General Counsel and Secretary					
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)					_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
BETHES	SDA, MD 2	20814									Tomi med by	Wore than One	c reporting rers	<b>л</b> і	
(Cit	y)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		n Date, i	f Code (Instr		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D) Ow Train	f (D) Owned Following Reported Transaction(s) (Instr. 3 and 4)		ed	Ownership Form:	Beneficial
				(Month/Day/Ye		r) Co	de V	Amount (D)							Ownership (Instr. 4)
Reminder:	Report on a s	separate line for eac		Derivativ	e Securi	ties Acc	Pers cont form	ons water	in this fo lays a cur d of, or Be	rently valid	required d OMB co	to respon	d unless th		474 (9-02)
1. Title of	2. Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	Table II -	Derivativ (e.g., puts 4. Transac Code	tion of Second	varrant Number Derivati curities quired (	Pers cont form quired, Do options 6. Data and Ex (Mont	isposed convergence	in this fo lays a cur d of, or Ber ertible secu cisable on Date	rm are not rently valid	required d OMB co	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned	of 10. Ownersh Form of Derivativ Security:	ip of Indired Beneficia Ownersh (Instr. 4)
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	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Barber Jamie Allen 2 BETHESDA METRO CENTER, SUITE 440 BETHESDA, MD 20814			General Counsel and Secretary			

## **Signatures**

/s/ Jamie Barber	07/10/2020
**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).
- Represents units of limited partnership interest ("LTIP Units") in Global Medical REIT L.P. (the "OP"), the operating partnership of the Issuer, that were granted to the Reporting Person under the Issuer's 2016 Equity Incentive Plan (as amended from time to time) on July 9, 2020. The LTIP Units vest in equal one-fourth installments on the first four
- (2) As described in the OP's partnership agreement, vested LTIP Units that have achieved capital account parity may be exchanged at any time after vesting for cash or, at the election of the Issuer, for shares of Common Stock of the Issuer on a one-for-one basis. The LTIP Units have no expiration date.

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.