SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

1. Name and Add Barber Jam	•	rting Person [*]				Name and Ticker Medical RE							tionship of F all applicab Director		Person(s) to Issuer 10% Ov	
(Last)	(First)	```	/liddle)		3. Date of 02/28/20	Earliest Transacti 23	ion (Mont	h/Day/	Year)			X	Officer (g below) Gener		el anc	Other (s below)	
SUITE 800					4. If Amen	dment, Date of O	riginal Fil	ed (Mo	onth/Day/	Year)		6. Indiv	idual or Join			heck Applic	able Line)
(Street) BETHESDA	MD	2	0814												•	ne Reportin	ig Person
(City)	(State) (Z	Zip)														
		Т	able I - Nor	n-Deriv	vative Se	ecurities Acq	uired,	Disp	osed o	f, or l	Benefic	ially Ow	ned				
1. Title of Securi	ty (Instr. 3)			2. Trans Date (Month/		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (I 8)				quired (A)) (Instr. 3,		5. Amount Securities Beneficiall Following	y Owned Reported	Form	nership : Direct (D) lirect (I) . 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	Amount	:	(A) or (D)	Price	 Transaction(s) (Instr. 3 and 4) 			linstr		
						urities Acqui s, warrants, d		•				•	ed				
1. Title of Derivative Security (Instr.	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any		ansaction ode (Instr.	5. Number of Derivative Securities	6. Date E Expiratio (Month/D	on Date		Secur	e and Amo ities Unde ative Secu	erlying	8. Price of Derivative Security	9. Numbe derivative Securities	•	10. Ownership Form:	11. Nature of Indirect Beneficial

	Conversion or Exercise Price of Derivative Security		Execution Date, if any (Month/Day/Year)	Transac Code (Ir 8)		Derivati Securiti Acquire or Dispo of (D) (II 4 and 5)	es d (A) osed nstr. 3,	Expiration Da (Month/Day/)		Securities Und Derivative Secu 3 and 4)		Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
LTIP Unit (Right to Buy) ⁽¹⁾	(2)	02/28/2023		A		4,732		(2)	(2)	Common Stock	4,732	\$0	216,203	D		

Explanation of Responses:

1. Represents units of limited partnership interest ("LTIP Units") in Global Medical REIT L.P. (the "OP"), the operating partnership of the Issuer. The Issuer's Board of Directors determined that on February 28, 2023, 50% of the LTIP Units will become vested and nonforfeitable as a result of meeting certain market-based performance criteria as of December 31, 2022 and February 28, 2023 and 50% of the LTIP Units will vest on February 28, 2024 pursuant to the grant award agreement stipulations. The LTIP Units were awarded pursuant to an LTIP Unit vesting agreement, the form of which was filed as Exhibit 10.1 to the Issuer's Quarterly Report on Form 10-Q filed on May 6, 2022. The LTIP Units were issued pursuant to the Issuer's 2016 Equity Incentive Plan (as amended from time to time) and have no expiration date.

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 on a one-for-one basis. LTIP Units have no expiration date.

/s/	Jamie	Barber

** Signature of Reporting Person

02/28/2023 Date

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

 * 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.

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 Number.

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