FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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INITIAL STATEMENT OF 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

Molla Coorga M			. Date of Event Requiring Stater Month/Day/Yea	ment	3. Issuer Name and Ticker or Trading Symbol Piedmont Office Realty Trust, Inc. [PDM]						
(Last)			1/09/2015	,		tionship of Reporting Pers	• •		5. If Amendment, Date of Original Filed (Month/Day/Year)		
11695 JOHNS CREEK PARKWAY STE 350					X	Officer (give title below) EVP- Southeast R	10% Owner Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting		
(Street) JOHNS CREEK	GA	30097			EVF- Southeast		Kegiuli		Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					Beneficially Owned (Instr. 4) Form: or Indi		Form: Dire	orm: Direct (D) (Instr r Indirect (I)		ature of Indirect Beneficial Ownership r. 5)	
Common Stock						35,508	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exercis. Expiration Date (Month/Day/Yea			ate		Underlying Derivative Securi		4. Conversion or		5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	n Title	,	Amount or Number of Shares	Exerci Price o Deriva Securi	of tive	Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

Remarks:

<u>Laura P. Moon, Attorney-in-</u> Fact for George M. Wells <u>11/13/2015</u>

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).