FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 205	49	
----------------------	----	--

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

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 Address of Reporting Person*  Wells George M.  (Last) (First) (Middle)						2. Issuer Name and Ticker or Trading Symbol Piedmont Office Realty Trust, Inc. [ PDM ]  3. Date of Earliest Transaction (Month/Day/Year) 02/10/2024										eck all app Direct	onship of Reportin ill applicable) Director Officer (give title below)		10% Ov Other (s below)	Owner (specify
5565 GLENRIDGE CONNECTOR STE 450					4. If	If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					
(Street) ATLAN	ΓA G	<b>A</b> :	30342			Form filed by More than Person											n One Repo	rting		
(City) (State) (Zip)  Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intend satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									ed to											
		Tab	le I - Noi	n-Deriv	/ative	Sec	uriti	ies Ac	qui	ired, C	Disp	osed o	of, or E	Bene	eficial	y Owne	d			
Date			2. Trans Date (Month/		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.						Securi Benefi Owned	i. Amount of Securities Beneficially Dwned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	Amount (A)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 02/				02/10	0/2024					M		3,33	8 A		(1)(2)	94,535		D		
Common Stock 02/10			0/2024	1				F		1,783	3 <sup>(2)</sup> D		\$6.62	92,752			D			
		Т	able II -									sed of onverti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code ( 8)				6. Date Exercisa Expiration Date (Month/Day/Yea				7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title	O N O	lumber					
Restricted Stock Units	<b>\$0</b> <sup>(1)</sup>	02/10/2024			M			3,338		(2)		(2)	Commo	n 3	3,338	<b>\$0</b>	43,86	8	D	

## **Explanation of Responses:**

- 1. Each restricted stock unit represents a contingent right to receive one share of PDM common stock. Restricted stock units may be settled in cash or common stock at PDM's election.
- 2. On February 10, 2022, the reporting person was granted 13,353 restricted stock units, vesting in four equal, annual installments beginning on the grant date. On February 10, 2024, 25% of the grant vested (3,338 shares), and were settled in PDM common stock. In connection with this vesting, 1,783 shares were forfeited by the employee and delivered to PDM to satisfy tax withholding obligations.

## Remarks:

/s/ Laura P. Moon as Attorneyin-Fact for George M. Wells

\*\* Signature of Reporting Person

Date

02/13/2024

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

- $^{\star}$  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.