FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | OMB APPROVAL | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | |
| 1 | Estimated average burden | | | | | | | | | |

0.5

hours per response:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* WIBERG ROBERT K (Last) (First) (Middle) 11695 JOHNS CREEK PARKWAY STE. 350 (Street) JOHNS CREEK GA 30097 | | | | | 3. D 05/ | 2. Issuer Name and Ticker or Trading Symbol Piedmont Office Realty Trust, Inc. [PDM] 3. Date of Earliest Transaction (Month/Day/Year) 05/01/2017 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) EVP-Mid Atlantic 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | Owner r (specify y) Applicable |
|---|--|----------|------------|--------------------------------------|-------------|---|--|--------------------------------------|--|-----|---|---|---------------|----------------------|--|---|---|--|---------------------------------|
| (City) | (5 | state) (| Zip) | | | | | | | | | | | | | Pers | OII | | |
| | | Tabl | le I - Noi | n-Deriv | ative | Se | curitie | s Acq | uired, | Dis | posed o | f, or | r Ben | eficia | ally (| Owne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Execution Date, | | Transaction Disposed Code (Instr. 5) | | | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | 4 and Se Be Ov | | ount of ities icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | | v | Amount | | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) |
| Common Stock 05/01/ | | | | | /2017 | | | | | | 965(1) | | D | \$22.09 | | 62,246 | | D | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | titive Conversion Date Execution D ity or Exercise (Month/Day/Year) if any | | Date, | 4. Transaction Code (Instr. 8) | | of Deriv Secur Acqu (A) or Dispo of (D) (Instr | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 5. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amour or Numbe of Title Shares | | t r | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. In connection with the vesting of 2,913 shares of deferred stock on May 1, 2017 (representing 25% of an initial grant made on May 1, 2015), 965 shares were forfeited by the employee and delivered to the Company to satisfy tax withholding obligations.

Remarks:

/s/ Laura P. Moon as Attorneyin-Fact for Robert K. Wiberg

05/03/2017

** Signature of Reporting Person

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.