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| Most Lisa M. | | | | | | | | | | | |
|--|--|------------|---|---|-------------|---|--|---|---------------------|----------|--|
| Form 4 | | | | | | | | | | | |
| January 31, 20 | Л | | | | | | | | OMB AF | PPROVAL | |
| Washington, D.C. 20549 | | | | | | | | OMB Number: | 3235-0287 | | |
| Check this box if no longer which to STATEMENT OF CHANGES IN BENEFICIAL C | | | | | | | | Expires: | January 31, 2005 | | |
| subject to Section 16. Form 4 or | SIAIE | MENT O | F CHAN(| Estimated average burden hours per response 0. | | | | | | | |
| Form 5 obligations may contin <i>See</i> Instruc 1(b). | ue. Section 17 | (a) of the | | lity Holdi | ng Comp | any A | Act of | e Act of 1934, 1935 or Section 0 | 1 | | |
| (Print or Type Re | sponses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Most Lisa M. | | | 2. Issuer Name and Ticker or Trading Symbol PENNSYLVANIA REAL ESTATE | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| | | | | MENT TI | _ | EIJ | | | | | |
| (Last) (First) (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | Director 10% Owner X_ Officer (give title Other (specify below) below) | | | | |
| INVESTMEN | REAL ESTATH NT TRUST, TH 200 SOUTH H | łΕ | 01/29/20 | 19 | | | | SVP, Genera | al Counsel&Se | cretary | |
| | (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | | |
| PHILADELP | HIA, PA 1910 | 2 | | | | | | Form filed by M Person | | | |
| (City) | (State) | (Zip) | Table | I - Non-De | rivative Se | ecuriti | es Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | any | | emed on Date, if /Day/Year) | 3.4. Securities AcquiredTransaction(A) or Disposed ofCode(D)(Instr. 8)(Instr. 3, 4 and 5) | | | Securities Beneficially Owned | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| Shares of | | | | Code V | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | |
| Beneficial Interest, par value \$1.00 per share | 01/29/2019 | | | A | 21,692 | A | \$ 0 (1) | 58,642 <u>(2)</u> | D | | |

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

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information contained in this form are not
required to respond unless the formSEC 1474
(9-02)

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displays a currently valid OMB control number.

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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 5 | ate | 7. Title Amour Underl Securit (Instr. 2 | nt of ying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|---|--|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|-----------------------------------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Most Lisa M. C/O PENN. REAL ESTATE INVESTMENT TRUST THE BELLEVUE, 200 SOUTH BROAD STREET PHILADELPHIA, PA 19102 | | | SVP, General Counsel&Secretary | | | |

Signatures

Lisa M. Most

01/31/2019

**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).
- (1) Grant of restricted shares for no consideration.
- (2) Includes 19,423 total shares held pursuant to an employee share purchase plan.

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.