Edgar Filing: Holland Elizabeth I - Form 4

| Holland Eliza | abeth I | | | | | | | | | | | |
|--|--------------------|------------|---|---|-------------|------------------|--|---|--|---|--|--|
| Form 4 | | | | | | | | | | | | |
| January 04, 2 | 2019 | | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | r | OMB APPROVAL | | | |
| Check thi | | STATES | | hington, l | | | IGE (| 201011011551010 | OMB Number: | 3235-0287 | | |
| Check this box if no longer CTLA TED (ENTER OF CTLA NGER IN DENEED CLA L ON NED STUD OF | | | | | | | Expires: | January 31, 2005 | | | | |
| subject to STATEMENT OF CI Section 16. Form 4 or | | | | CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES | | | | | | Estimated average burden hours per | | |
| Form 5 | | suant to S | Section 16 | (a) of the | Securiti | es Ex | chang | ge Act of 1934, | response | 0.5 | | |
| obligation may conti | inue. Section 17(a | a) of the | Public Uti | lity Holdi | ing Com | pany | Act of | f 1935 or Sectio | n | | | |
| <i>See</i> Instru 1(b). | iction | 50(II) | of the Inv | estinent | Joinpany | Act | 01 194 | +0 | | | | |
| (Print or Type R | Responses) | | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Holland Elizabeth I | | | 2. Issuer Name and Ticker or Trading Symbol | | | | g | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| | | | FEDERAL REALTY INVESTMENT TRUST [FRT] | | | | | (Check all applicable) | | | | |
| (Last) (First) (Middle) 1626 EAST JEFFERSON STREET | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | | | |
| 1626 EAST | JEFFERSON ST | KEEI | 01/02/20 | 19 | | | | | | | | |
| (Street) | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) | | | | |
| ROCKVILL | E, MD 20852-40 | 41 | | | | | | _X_ Form filed by 0 Form filed by N Person | | | | |
| (City) | (State) | (Zip) | Table | I - Non-De | erivative S | ecurit | ties Acc | quired, Disposed of | f, or Beneficial | lly Owned | | |
| 1.Title of Security (Instr. 3) | any | | emed on Date, if /Day/Year) | 3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5) | | |) | Securities Beneficially Owned | 5. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| G | | | | Code V | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | |
| Common shares of beneficial interest | 01/02/2019 | | | А | 966 | А | \$0 | 1,753 | D | | | |

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

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 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transact Code (Instr. 8) | 5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 3 | Date | 7. Title and Amount of Underlying Securities (Instr. 3 and | Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--------------------------------------|---|---------------------|--------------------|--|--------------------------------------|--|
| | | | | Code V | 7 (A) (D) | Date Exercisable | Expiration Date | Amo or Title Num of Shar | nber | |

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Holland Elizabeth I 1626 EAST JEFFERSON STREET ROCKVILLE, MD 20852-4041 | Х | | | | | | |
| Signatures | | | | | | | |
| Dawn M. Becker, by power of attorney | C | 1/04/2019 | | | | | |
| **Signature of Reporting Person | | Date | | | | | |
| Explanation of Boononooo | | | | | | | |

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).

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.