FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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).

STATEMENT OF CHANGES IN 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

	pe Response	5)												
1. Name and Address of Reporting Person* GROOTWASSINK SARA L			2. Issuer Name and Ticker or Trading Symbol WASHINGTON REAL ESTATE INVESTMENT TRUST [WRE]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Check all applicable) Other (specify below)						
(Last) (First) (Middle) 6110 EXECUTIVE BLVD., SUITE 800			3. Date of Earliest Transaction (Month/Day/Year) 12/17/2008								E.V.P. & CF	3		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
ROCKVILLE, MD 20852 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqu					ured, Disposed of, or Beneficially Owned					
(Instr. 3) Date		T ****	2A. Deemed Execution Date, i	3. Transacti Code (Instr. 8)				quired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		les Following	6. Ownership Form:	Beneficial	
				(Month/Day/Year	Code	V	Amoun	(A) or (D)	Price	(Instr. 3 a	nd 4)		\ /	Ownership (Instr. 4)
Common	Stock		12/17/2008		A ⁽¹⁾		7,900	A	\$ 0	49,030.	10		D	
Common Stock 12/17/20		12/17/2008		F(1)		2,903	D	\$	46,127.	.10		D		
Reminder:	Report on a s	separate line f	or each class of secur	rities beneficially of	owned dire	_ -		y	26.05					
Reminder:	Report on a s	separate line f	Table II -	Derivative Securi	ties Acqu	Personn the t	sons whatained in form dis	y. no responding this for splays a	ond to orm are curre	not requesting ntly valid		ormation spond unle rol numbe	ss	1474 (9-02)
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1. Title of		3. Transaction	Table II - (on any any any any any any any any any an	Derivative Securi	ties Acqu varrants,	Pers confitted, D poptions 6. D and (Mc ve s i	sons whatained in form dis	y. no responding the second splays a second splay second splay spl	ond to orm are a curre neficial urities) 7. T Am Und	not requesting ntly valid	OMB cont	spond unle	of 10. Ownersh Form of Derivativ Security Direct (I or Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
GROOTWASSINK SARA L 6110 EXECUTIVE BLVD. SUITE 800 ROCKVILLE, MD 20852			E.V.P. & CFO			

Signatures

By: Thomas C. Morey For: Sara L. Grootwassink	12/17/2008
**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) Performance Share Units granted pursuant to the Washington Real Estate Investment Trust 2007 Omnibus Long-Term Incentive Plan based on closing price on 12/12/08 of \$26.05 (and related withholding done on same basis).

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.