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

| (Print or Ty | pe Response | s) | | | | | | | | | | | | | | | |
|---|---|---------------------------------|---|--|---|--------------------|-----------------|--------------------|---|---|--|--|---|------------|--|---|---------------|
| Name and Address of Reporting Person * Cederdahl James Bradley | | | | WA | 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) Other (specify below) Sr. V.P Property Operations | | | | |
| (Last) (First) (Middle) 6110 EXECUTIVE BOULEVARD, SUITE 800 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/12/2013 | | | | | | | | | Sr. V.P. | - Property (| perations | |
| (Street) ROCKVILLE, MD 20852 | | | | 4. If | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person | | | | | |
| (City | | (State) | (Zip) | | Т | able I | - Non | -De | rivative | ative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | |
| 1.Title of S (Instr. 3) | 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year | 2A. Deemed Execution Date, if any (Month/Day/Year | | Code (Instr. 8) | | | 4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5) (A) or Amount (D) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | ollowing | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | | 02/12/2013 | | | | A | 3,414.00 A \$ 0 | | \$ 0 | 19,996.7928 | | D | | | | | |
| | | | Table II | - Deriv | ative Securi | ties Ac | equire | Pers con the | sons wh tained i form dis | no res n this splay | s for s a Ben | m are curre eficial | not requesting ntly valid | OMB conf | ormation spond unle trol numbe | ss | C 1474 (9-02) |
| 1. Title of | 2 | 3. Transaction | on 3A. Deemed | | outs, calls, w | arran 5. | ts, op | | s, conver Date Exer | | | | itle and | 8 Price of | 9. Number | of 10. | 11. Natu |
| Derivative Security | Conversion or Exercise Price of Derivative Security | ersion Date (Month/Day of ative | Execution Day/Year) any | ate, if | tte, if Code Year) (Instr. 8) | | Number | | nd Expiration Date Month/Day/Year) | | Amount of Underlying Securities (Instr. 3 and 4) | | Derivative Security (Instr. 5) | | Owner Form of Deriva Securit Direct or Indi | ship of Indire Benefici Ownersh y: (Instr. 4) | |
| | | | | | | 4, an | 15) | | | | | | | | | | |

Reporting Owners

| | Relationships | | | | | | |
|---|---------------|--------------|-----------------------------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| Cederdahl James Bradley 6110 EXECUTIVE BOULEVARD, SUITE 800 ROCKVILLE, MD 20852 | | | Sr. V.P Property Operations | | | | |

Signatures

| By: Thomas C. Morey For: James Bradley Cederdahl | 02/14/2013 |
|--|------------|
| **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).
- $\textbf{(1)} \ \ Restricted \ Share \ Award \ that \ vests \ ratably \ over \ 3 \ years \ on \ 12/31/13, \ 12/31/14 \ and \ 12/31/15.$

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.