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

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 * BANNER JENNIFER S | | | | | 2. Issuer Name and Ticker or Trading Symbol Elme Communities [ELME] | | | | | | | | | (Check | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
|---|--|------------------|-------------|-----------------|---|---|--|-------|---|--------|---|--|----------|---|---|--|--|--|--|
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/15/2022 | | | | | | | | | | Officer (g below) | ive title | | Other (s | · |
| 1775 EYE STREET N.W. SUITE 1000 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv | ndividual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| (Street) WASHINGTON DC 20006 | | | | | | | | | | | | | | Form file | d by More | than O | ne Reportin | g Person | |
| (City) | (State) | (Zi _l | 0) | | | | | | | | | | | | | | | | |
| | | Та | ble I - Nor | n-Deri | ivativ | e Se | curitie | s Acq | uired, l | Disp | osed of, | or E | 3enefic | ially Ow | ned | | | | |
| Date | | | | th/Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | | ties Acquired (A) or I Of (D) (Instr. 3, 4 and | | | 5. Amount Securities Beneficially Following I | y Owned Reported | Form: | nership Direct (D) irect (I) 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Code | v | Amount | | (A) or (D) | Price | (Instr. 3 and | | | | (Instr. 4) | |
| Common Stock 12/1 | | | | | 5/202 | 2 | | | A | | 2,6690 | 9 ⁽¹⁾ A | | \$0.0 | 3,669 | 3,669.231 | | 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) | vative Conversion Date Execution Date, urity (Instr. 3) or Exercise (Month/Day/Year) if any | | | ate, 1 | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable an Expiration Date (Month/Day/Year) | | e | 7. Title and Am Securities Und Derivative Secu (Instr. 3 and 4) | | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | e s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | | Amount or Number of Shares | | (Instr. 4) | | | |

Explanation of Responses:

1. These are Restricted Share Units granted pursuant to the Elme Communities Deferred Compensation Plan for Directors - the number of shares awarded is based on the closing price on 12/15/2022 of \$18.73. The units settle only in stock.

By: W. Drew Hammond For: Jennifer S. Banner

12/16/2022

** 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.