FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

## 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(c). S	ee Instruction	10.																	
Name and Address of Reporting Person*  Crate Darrell W				2. Issuer Name <b>and</b> Ticker or Trading Symbol  Easterly Government Properties, Inc.								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Crate Darrell W			DEA ]									✓ Director				10% O	vner		
(Last)	(Fi	rst) (ľ	Middle)											1	Office below	er (give title v)		Other (s	specify
C/O EASTERLY GOVERNMENT PROPERTIES,			3. Date of Earliest Transaction (Month/Day/Year)								President & CEO								
INC.			12/23/2024																
2001 K STREET NW, SUITE 775 NORTH			4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable								
(Street)						Line)  Form filed by One Repo								orting Porc	nn				
WASHIN	NGTON D	C 2	0006											Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(St	rate) (Z	Zip)												. 0.00	•••			
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	quired	l, Dis	posed of	, or E	enefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/			Execution Date,		,	3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				and 5) Securi Benefi Owned		cially I Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
						Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock 12/23/20				024				P		10,000	Α	\$10.9	91(1)		171,479		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)  2. Conversion or Exercise Price of Derivative Security  1. Title of Derivative Security  2. Conversion Date (Month/Day/Year)  3. Transaction Date Execution Date, if any (Month/Day/Year)		eemed ition Date,	4. Transaction Code (Instr. 8)		5. Nu of Deriv	rative rities ired r osed )		Exerc	cisable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow Fo Dir or (I)	0. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

1. Represents the weighted average purchase price per share. These shares were purchased in multiple transactions at prices ranging from \$10.92 to \$10.90 per share. The reporting person undertakes to provide upon request by the U.S. Securities and Exchange Commission staff, the Issuer or a security holder of the Issuer, full information regarding the number of shares purchased at each separate price.

/s/ Franklin V. Logan,

Attorney-in-fact for Darrell W. 12/23/2024

Crate

\*\* 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.