Edgar Filing: Berson Jeffrey H. - Form 4

| Berson Jeffre Form 4 | ey H. | | | | | | | | | | |
|---|--|--|--|--|--------------|-------|---|--|---|----------|--|
| November 0 | 6. 2017 | | | | | | | | | | |
| FORM 4 UNITED STATES SECUL Wa | | | | RITIES AND EXCHANGE COMMISSION ashington, D.C. 20549 NGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | Simple3235-0287Number:January 31Expires:2005Estimated averageburden hours per | | |
| Form 5 obligatio may cont See Instr 1(b). | Filed pu ^{ns} Section 17 | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | |
| (Print or Type] | Responses) | | | | | | | | | | |
| Berson Jeffrey H. Symbol | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | | S Realty Trust, Inc. [QTS] | | | | (Check all applicable) | | | |
| | | | | ate of Earliest Transaction nth/Day/Year))3/2017 | | | | Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer | | | |
| | | | endment, Date Original onth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| OVERLAN | D PARK, KS 66 | 5213 | | | | | | | Iore than One Re | | |
| (City) | (State) | (Zip) | Tab | le I - Non-E | Derivative | Secur | ities Acq | uired, Disposed of | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | | n Date, if | 3. Transactic Code (Instr. 8) Code V | (Instr. 3, | spose | d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Class A common stock | 11/03/2017 | | | F | 2,542 (1) | D | \$ 58.61 | 46,708 | 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)

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| 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 Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 3 | Date | Amou Unde Secur | le and unt of rlying rities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--------------------------------------|--|---------------------|--------------------|-----------------------|--|---|--|
| | | | | Code V | ⁷ (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|------------|-------------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| Berson Jeffrey H. C/O QTS REALTY TRUST, INC. 12851 FOSTER STREET OVERLAND PARK, KS 66213 | | | Chief Financial Officer | | | | | |
| Signatures | | | | | | | | |
| /s/ Timothy J. Kuester, Attorney-in-Fact | | 11/06/2017 | | | | | | |
| <u>**</u> 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) Reflects shares surrendered to the Issuer to satisfy tax withholding obligation in connection with the vesting of restricted shares.

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.