Edgar Filing: PENNSYLVANIA REAL ESTATE INVESTMENT TRUST - Form 4

PENNSYLVANIA REAL ESTATE INVESTMENT TRUST

Form 4

Shares of Beneficial

value \$1.00 per share

Interest, par 02/15/2005

February 17,	2005									
FORM	ORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL		
	UNITED	STATES SE	CCURITIES A Washington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction See Instruction STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES SECURITIES 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						Expires: January 31 200 Estimated average burden hours per response 0.				
1(b). (Print or Type Ro	esponses)									
1. Name and Ad	ddress of Reporting I	Syı PE	Issuer Name and mbol NNSYLVANI VESTMENT 1	A REAL	EST	ь	5. Relationship of Issuer (Checl	Reporting Per		
(Last) (First) (Middle) 3. Date of (Month/Da			Date of Earliest Tr. onth/Day/Year) /15/2005	_	_X_ Officer (give below)				6 Owner er (specify	
	(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
PHILADELI	PHIA, PA 19102						Form filed by M Person			
(City)	(State)	(Zip)	Table I - Non-D	erivative S	Securi	ties Acqu	iired, Disposed of	or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da any (Month/Day/	Code	4. Securition(A) or Dir (Instr. 3, 4)	sposed	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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Shares of Beneficial Interest, par value \$1.00 per share	02/15/2005		F	1,665	D	\$ 42.08	133,008	D		

A

19,113 A <u>(1)</u> 152,121

D

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Shares of			As UGMA
Beneficial			custodian
Interest, par	200	I	for
value \$1.00			children (2)
ner share			children (2)

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.

SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						•
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable Date		Number			
						2.1010154010	2410		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
1000	Director	10% Owner	Officer	Other		
WELLER JONATHAN B						
C/O PENN. REAL ESTATE INVESTMENT TRUST	X		Vice			
THE BELLEVUE, 200 S. BROAD ST.	Λ		Chairman			
PHILADELPHIA, PA 19102						

Signatures

Jonathan Weller	02/17/2005
**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) Grant of restricted shares for no consideration.

Reporting Owners 2

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(2) Held by Mr. Weller as custodian for his children under the New York Uniform Gifts to Minors Act.

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.