## Edgar Filing: SOWA GEORGE D - Form 4

SOWA GEORGE Form 4	É D										
September 01, 20	06										
FORM 4	UNITED		SECU	DITIEC		CILANO		т	PPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								Estimated burden hou response	urs per		
1(b). (Print or Type Respon	nses)										
1. Name and Address SOWA GEORGI		Person <u>*</u>	Symbol	er Name <b>an</b> DYWINE			5. Relationship o Issuer ST (Che	of Reporting Per eck all applicabl			
(			<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>08/28/2006</li></ul>				below)	Officer (give title Other (specify			
(i RADNOR, PA 1	4. If Amendment, Date Original Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting Person</li> </ul>						
(City) (	State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities	s Acquired, Disposed (	of, or Beneficia	lly Owned		
	nsaction Date th/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	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)		
Reminder: Report on	a separate line	for each cl	ass of sec	urities bene	Perso inform requir	ons who i nation co red to res ays a cur	ly or indirectly. respond to the colle ontained in this form spond unless the for rently valid OMB co	i are not rm	SEC 1474 (9-02)		
	Tabl						or Beneficially Owned le securities)	I			

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and Amount of	8. P
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration Date	Underlying Securities	Deri

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr.		of Deriv Secur Acqui (A) or Dispo of (D) (Instr. 4, and	ities ired r osed ) . 3,		/Year)	(Instr. 3 and 4	)	Secu (Ins
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Performance Rights	(1)	08/28/2006		A	v	0 (1)		<u>(1)</u>	<u>(1)</u>	Common Shares of Beneficial Interest	0 (1)	

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
SOWA GEORGE D 555 EAST LANCASTER AVENUE SUITE 100 RADNOR, PA 19087			Senior Vice President					
Signatures								

George D. Sowa 09/01/2006

<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).

This Form 4 is filed by the reporting person to disclose his receipt of an award under the Brandywine Realty Trust (BDN) 2006 Long-Term Outperformance Compensation Program (the Program), a copy of which BDN is filing as an exhibit to a Current Report on Form 8-K. The award represents a contingent right to receive 4.5% of a compensation pool that may be funded under the Program, payable in BDN common shares, If BDNs total shareholder return during the measurement period established under the Program exceeds

 payable in BDN common shares, if BDNs total shareholder return during the measurement period established under the Program exceeds specified hurdles and if the reporting person satisfies the vesting conditions applicable to his award. The number of BDN common shares, if any, that the reporting person would receive on account of his award will depend on the extent to which the performance hurdles are exceeded, the price of the BDN common share at the end of the measurement period and the reporting persons achievement of the vesting conditions applicable to his award.

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.