Edgar Filing: Carr Oliver T III - Form 4

| Carr Oliver 1 Form 4 | | | | | | | | | | | |
|--|--|--|--|---|---|---------------------------------------|------------------------------|--|--|--------------|--|
| December 20 FORM Check thi if no long subject to Section 1 Form 4 or Form 5 obligation may cont <i>See</i> Instru 1(b). | 4 UNITED s box ger 6. r Filed put 18 Section 170 | MENT O rsuant to S (a) of the | Was F CHAN Section 10 Public Ut | Shington, GES IN I SECUR | D.C. 20 BENEFI ITIES e Securit ling Con | 549 ICIA ies E | LOWN Exchange y Act of | OMMISSION NERSHIP OF e Act of 1934, 1935 or Sectior 0 | OMB Number: Expires: Estimated a burden hou response | • | |
| (Print or Type F | Responses) | | | | | | | | | | |
| Carr Oliver T III Syn | | | Symbol | 2. Issuer Name and Ticker or Trading ymbol Columbia Equity Trust, Inc. [COE] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) (First) (Middle) 3. Date | | | | of Earliest Transaction n/Day/Year) | | | | (Check all applicable) <u>X</u> Director <u>10%</u> Owner <u>X</u> Officer (give title <u>Other (specify below)</u> President/ CEO/Chairman | | | |
| WASHING | (Street) | | | ndment, Da th/Day/Year) | - | l | | 6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M | One Reporting Pe | rson | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative | Secur | ities Aca | Person uired, Disposed of | or Beneficial | lv Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | Executio any | | 3. Transactio Code (Instr. 8) | 4. Securit n(A) or Di (Instr. 3, | ties A spose 4 and (A) or | cquired d of (D) 5) | 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 | |
| Common Stock, par value \$.001 per share | 12/19/2005 | | | Code V P | Amount 250 | (D) A | Price \$ 15.09 | 250 | D | | |
| Common Stock, par value \$.001 per share | 12/19/2005 | | | Р | 3,000 | А | \$ 15.13 | 3,250 | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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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)

| 1. Title of Derivative | 2. Conversion | 3. Transaction Date (Month/Day/Year) | | 4. Transactio | 5. orNumber | 6. Date Exerce Expiration D | | 7. Title ar Amount o | | 8. Price of Derivative | 9. Nu Deriv |
|---------------------------|---|---|------------------|--------------------|--|--------------------------------|--------------------|--|-------------|------------------------|---|
| Security (Instr. 3) | or Exercise Price of Derivative Security | (montal Day Foar) | (Month/Day/Year) | Code (Instr. 8) | of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | Underlyir Securities (Instr. 3 a | ng S s (| Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | Code V | | Date Exercisable | Expiration Date | or Title Nu of | | | |

Reporting Owners

| Reporting Owner Name / Address | | | Relationships | | | | | |
|--|----------|-----------|-------------------------|-------|--|--|--|--|
| 1 9 | Director | 10% Owner | Officer | Other | | | | |
| Carr Oliver T III 1750 H STREET, N.W. SUITE 500 WASHINGTON, DC 20006 | Х | | President/ CEO/Chairman | | | | | |
| Signatures | | | | | | | | |
| /s/ John A. Schissel Attorney - in - Fact | 1 | 2/20/2005 | | | | | | |
| **Signature of Reporting Person | | Date | | | | | | |
| Explanation of Responses: | | | | | | | | |

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).

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.