## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL					
OMB Number:	3235-0287				
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nours per response	e 0.5				

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Print or Type Responses)  . Name and Address of Reporting Person * WRIGHT DANIEL C			2. Issuer Name and Ticker or Trading Symbol Plymouth Industrial REIT Inc. [PLYM]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
			3. Date of Earliest 06/15/2019	tte of Earliest Transaction (Month/Day/Year) 5/2019					X Officer (give title below) Other (specify below)  CFO				
BOSTON, MA 02	(Street)  4. If Amendment, Date Original Filed(Month/I			d(Month/Da	ay/Year)	-	6. Individual or Joint/Group Filing(Check Applicable _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			le Line)			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acqu			Acqui	uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day)		ate	any	ution Date, if Code (Instr. 8)		(A) or Disposed of (D)			D) Beneficially Owned Following Reported Transaction(s)		ollowing	Ownership of Form:	Beneficial
			(Month/Day/Year	Code	V	Amount	(A) or (D)	Price	(Instr. 3 ar	nd 4)		` /	Ownership (Instr. 4)
Common Stock	06	5/15/2019		A	1	15,000	A \$	0 8	43,916			D	
Reminder: Report on a	separate line for ea				Person contai the for	ns who i ined in th rm displ	his forn lays a c	n are urrer	not requ		ormation spond unle trol numbe	ss	1474 (9-02)
Reminder: Report on a	separate line for ea	ach class of secur	ities beneficially or		Person contai	ns who i	his forn	n are	not requ	ired to res	spond unle	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security	3. Transaction Date	Table II - I ( 3A. Deemed Execution Date any	Derivative Securit e.g., puts, calls, wa	ies Acquire arrants, op 5. Number of Derivative Securities Acquired (A) or Disposed	Person contai the for ed, Disp tions, c	ns who ined in the displayment of the displayment o	chis form lays a co or Beneral ole securi able Date	ficiall ficial	not requ	OMB cont	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Ownersl Form of Derivati Security Direct (I or Indirect)	11. Nat of Indir Benefic Owners (Instr. 2
1. Title of Derivative Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - I ( 3A. Deemed Execution Date any	Derivative Securit e.g., puts, calls, wa 4. Transaction Code	ies Acquire rrants, op 5. Number of Derivative Securities Acquired (A) or	Person contai the for ed, Disp tions, c	ns who in the convertible exercises a principle in the convertible exercises a principle in the convertible exercises a principle in the convertible exercises and the convertible exercis	chis form lays a co or Beneral ole securi able Date	ficiall ficiall ficiall ficiall 7. Ti Amo Unde Secu (Instr	e not requently valid  Ity Owned  Itle and bount of erlying urities	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	of 10. Ownersl Form of Derivati Security Direct (1 or Indire	11. Nat of Indin Benefic Owners (Instr. 4

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
WRIGHT DANIEL C C/O 260 FRANKLIN STREET, 7TH FLOOR BOSTON, MA 02110			CFO			

## **Signatures**

Daniel C. Wright	06/17/2019
**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).

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.