FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, D.0 | C. 20549 |
|-----------------|----------|
|-----------------|----------|

| STATEMENT ( | OF | CHANGES | IN BENEFIC | CIAL | OWNERS | SHIP |
|-------------|----|---------|------------|------|--------|------|
|             |    |         |            |      |        |      |

|   | OMB APPROVAL             |     |  |  |  |  |  |  |  |  |
|---|--------------------------|-----|--|--|--|--|--|--|--|--|
|   | OMB Number: 3235-0287    |     |  |  |  |  |  |  |  |  |
|   | Estimated average burden |     |  |  |  |  |  |  |  |  |
| ı | hours per response:      | 0.5 |  |  |  |  |  |  |  |  |

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

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

| 1. Name and Address of Reporting Person* BERKES JEFFREY S     |  |         |                              |                 | 2. Issuer Name and Ticker or Trading Symbol FEDERAL REALTY INVESTMENT TRUST [ FRT ] |   |  |            |                                      |  |                        |                       |  | ck all app<br>Direct<br>Office   | tor<br>r (give title  | ng Pers   | 10% Ov                                | wner   |  |
|---|--|---------|------------------------------|-----------------|---|---|--|------------|--------------------------------------|--|------------------------|-----------------------|--|--|---|---|---------------------------------------|--------|--|
| (Last) (First) (Middle) 909 ROSE AVENUE - SUITE 200           |  |         |                              |                 |   | 3. Date of Earliest Transaction (Month/Day/Year) 02/07/2023 |  |            |                                      |  |                        |                       |  |  | below   | President   | t and (                               | below) |  |
| (Street) NORTH BETHES   | SDA M  | D 2     | 0852                         |                 | 4. If <i>I</i>  | Line)   |  |            |                                      |  |                        |                       |  | Form   | Form filed by One Reporting Person  Form filed by More than One Reporting  Person |   |                                       |        |  |
| (City)  | (St  | ate) (Z | Zip)                         |                 |   |   |  |            |                                      |  |                        |                       |  |  |   |   |                                       |        |  |
|   | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |         |                              |                 |   |   |  |            |                                      |  |                        |                       |  |  |   |   |                                       |        |  |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Day) |  |         |                              | Execution Date, |   | Date,   | Transaction Disposed Of Code (Instr. 5)                  |            | ies Acquired (A<br>Of (D) (Instr. 3, |  | 4 and Securi<br>Benefi |                       | ies<br>ially<br>Following                    | Form   | : Direct<br>Indirect<br>str. 4)   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)       |                                       |        |  |
|   |  |         |                              |                 |   | v   | Amount   | (A)<br>(D) | or P                                 | rice   | Transa                 | action(s)<br>3 and 4) |  |  | (   |   |                                       |        |  |
| Common Shares of Beneficial Interest 02/07/2                  |  |         |                              |                 | 2023  |   |  |            | A                                    |  | 11,210                 | A                     | A  | \$ <mark>0</mark>  | 77  | ,061  |                                       | D      |  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |         |                              |                 |   |   |  |            |                                      |  |                        |                       |  |  |   |   |                                       |        |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any  |         | 4.<br>Transa<br>Code (<br>8) |                 |   |   | 6. Date Exercisable and Expiration Date (Month/Day/Year) |            |                                      | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) |                        | tr.                   | Price of<br>erivative<br>ecurity<br>nstr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | y [0  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |        |  |
|   |  |         |                              |                 | Code V  |   | (A)  | (D)        | Date<br>Exercisa                     | able   | Expiration<br>Date     | Title                 | or<br>Numb<br>of<br>Share                    |  |   |   |                                       |        |  |

**Explanation of Responses:** 

Remarks:

Dawn M. Becker, by power of attorney

02/09/2023

\*\* Signature of Reporting Person

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

- \* 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.

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 Number.