### FORM 4

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

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

## 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

1. Name and Address of Reporting Person *					2. I	2. Issuer Name <b>and</b> Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Mavoides Peter M.						ESSENTIAL PROPERTIES REALTY TRUST, INC. [ EPRT ]								_X_ Director	, <b>.</b>	10%	ó Owner	
(Last)	(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)							X_ Officer (give title below) Other (specify below)  President and CEO					
902 CARNEGIE CENTER BLVD., SUITE 520						4/12/2024												
DDINCETON	(Stree	,			4. I	f Am	nendmer	nt, Date On	rigin	al File	ed (MM/DI	O/YYY	YY)	6. Individual o			Check Appl	icable Line)
PRINCETO!			o)											X Form filed by Form filed by		ting Person One Reporting P	erson	
			Table 1	I - Non	-Der	ivati	ve Secu	ırities Acq	uire	ed, Dis	sposed of	f, or l	Bene	eficially Owne	d			
1. Title of Security (Instr. 3)			Date	2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	de	4. Securities Acquir or Disposed of (D) (Instr. 3, 4 and 5)		) Fo		ollowing Reported Transaction(s) nstr. 3 and 4)			6. 7. Nature Ownership Form: Beneficial Direct (D) Ownership			
								Code	V	Amou	nt (A) or (D)	Pri	ce				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				4/12/20	024			<b>A</b> (1)		1,29	2 A	\$	60			556,196	D	
	Tabl	le II - Der	ivative	Securi	ities l	Bene	ficially	Owned (	<b>e.g.</b> , ]	puts,	calls, wa	rran	ts, op	ptions, conver	tible secu	ırities)		
Security (Instr. 3) Conversion or Exercise Price of Derivative Security Date Execution Date, if any		Frans. (str. 8)	Acquired Disposed (Instr. 3, 4		e Securities (A) or of (D) 4 and 5)		Expiration Date		7. Title and Ar Securities Und Derivative Sec (Instr. 3 and 4)		Jnderlying Security 14) unt or Number of	Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
			1		Joue	v	(A)	(D)								(111801. 4)	7)	

#### **Explanation of Responses:**

(1) Represents an adjustment to the shares subject to performance-based RSUs granted in 2021 which will vest on December 31, 2024 in connection with the payment of quarterly dividends to stockholders for the first quarter of 2024 pursuant to the terms and conditions of the underlying award agreement.

#### Remarks:

Exhibit 24.1 - Power of Attorney (incorporated by reference to the Power of Attorney filed as Exhibit 24.1 to the Form 4 filed by the reporting person on November 4, 2021.)

**Reporting Owners** 

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Mavoides Peter M. 902 CARNEGIE CENTER BLVD. SUITE 520 PRINCETON, NJ 08540	X		President and CEO					

#### **Signatures**

**Signature of Reporting Person	I	Date

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 control number.