FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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).

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 Ty | pe Response | s) | | | | | | | | | | | | | | | | |
|---|-------------|--|-------------------------------|---|------------|---------------|-----------------|--------|--|---|--------------------------|--|--------------------------------------|--|---|---------------------------|------------|-------------------------|
| 1. Name and Address of Reporting Person* WAESCHE ROGER A JR | | | | 2. Issuer Name and Ticker or Trading Symbol CORPORATE OFFICE PROPERTIES TRUST [OFC] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Executive VP & COO | | | | | | |
| (Last) (First) (Middle) 11742 MAYFAIR FIELD DRIVE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/01/2007 | | | | | | | y/Year) | | Exe | culive VP & | .00 | | | |
| (Street) TIMONIUM, MD 21093 | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | h/Day/Year) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person | | | | | | |
| (City | ·) | (State) | | (Zip) | | | T | able I | - Non | -Deri | vative S | Securitie | s Acqu | iired, Dis | posed of, or l | Beneficially (| wned | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | | Exec | | tion Date, if | Code (Instr. 8) | | ction | 4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5) | | of (D) | Benefic Reporte | ant of Securities ially Owned Following d Transaction(s) | | Ownership Form: | Beneficial | |
| | | | | | (Month/Day | | y ear) | | ode | V | Amour | (A) or (D) | Price | (Instr. 3 | and 4) | | | Ownership (Instr. 4) |
| Restricte | d Commo | n Shares | 03/0 | 1/2007 | | | | | A | | 13,70 | 8 A | <u>(1)</u> | 188,01 | 0 (2) | | D | |
| | | | | Table II - I | | | | | t | the fo | orm dis | splays a of, or Be | curre | ently vali | d OMB con | spond unles rol number | | |
| Security | Conversion | | on 3A. Deemed Execution Da | te, if Transaction Code Year) (Instr. 8) | | tion | 5. | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. T Am Uno Sec | Fitle and count of derlying curities str. 3 and | Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownersh Form of Derivativ Security Direct (I or Indire | (Instr. 4) | | |
| | | | | | | Code | V | (A) | | Date Exerc | | Expiration Date | On Titl | Amour or Number of Shares | | | | |

Reporting Owners

| | Relationships | | | | | | | |
|---|---------------|--------------|--------------------|-------|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | |
| WAESCHE ROGER A JR 11742 MAYFAIR FIELD DRIVE TIMONIUM, MD 21093 | | | Executive VP & COO | | | | | |

Signatures

| Karen M. Singer, by Power of Attorney | 03/08/2007 | | |
|---------------------------------------|------------|--|--|
| **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).
- (1) The restrictions on the shares shall lapse in accordance with the following schedule: 33.3%, 33.3%, and 33.4%, commencing on the first anniversary of the grant and continuing on each anniversary date thereafter.
- (2) As of 3/1/07, 188,010 common shares comrpised of 132,334 outright and 55,676 restricted.

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.