

AMERICAN HEALTHCARE REIT, INC.

Reported by
SMITH WILBUR H III

FORM 3

(Initial Statement of Beneficial Ownership)

Filed 04/27/17 for the Period Ending 04/27/17

Address	18191 VON KARMAN AVENUE SUITE 300 IRVINE, CA, 92612
Telephone	949-270-9200
CIK	0001632970
SIC Code	6798 - Real Estate Investment Trusts
Industry	Specialized REITs
Sector	Financials
Fiscal Year	12/31

INITIAL STATEMENT OF 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 * Smith Wilbur H III	2. Date of Event Requiring Statement (MM/DD/YYYY) 4/27/2017	3. Issuer Name and Ticker or Trading Symbol Griffin-American Healthcare REIT IV, Inc. [NONE]
(Last) (First) (Middle) C/O GRIFFIN-AMERICAN HEALTHCARE REIT IV,, INC., 18191 VON KARMAN AVE., STE. 300	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)	
(Street) IRVINE, CA 92612 (City) (State) (Zip)	5. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Class T Common Stock	5299 (1)	D	

Table II - Derivative Securities Beneficially Owned (e.g. , puts, calls, warrants, options, convertible securities)

1. Title of Derivate Security (Instr. 4)	2. Date Exercisable and Expiration Date (MM/DD/YYYY)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Explanation of Responses:

- (1) Represents 5,000 shares of restricted Class T common stock awarded to Mr. Smith in connection with his initial election to the board of directors of the Issuer. The shares of restricted Class T common stock vested immediately as to 20.0% of the shares on the date of grant on 4/13/16, and the remainder vests on each anniversary thereafter over four years. Includes 299 shares of Class T common stock Mr. Smith acquired through the Issuer's distribution reinvestment plan.

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Smith Wilbur H III C/O GRIFFIN-AMERICAN HEALTHCARE REIT IV, INC., 18191 VON KARMAN AVE., STE. 300 IRVINE, CA 92612	X			

Signatures

/s/ **WILBUR H SMITH III**

4/27/2017

**Signature of Reporting Person

Date

* If the form is filed by more than one reporting person, *see* Instruction 5(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.

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