

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

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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 * Todd Candice W | | 2. Date of Event Requiring Statement (MM/DD/YYYY) 1/30/2024 | | | Y) | 3. Issuer Name and Ticker or Trading Symbol HIGHWOODS PROPERTIES, INC. [HIW] | | | | |
|---|---|---|-----------------------------------|---|---|--|---|---|--|--|
| Toda Canalee W | | | | | | | , . | • | | |
| (Last) (First) | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | | |
| 150 FAYETTEVILLE STREET, SUITE 1400 | | _X_ Director Officer (give title below) | | | 10% Owner Other (specify b | 10% Owner Other (specify below) | | | | |
| RALEIGH, NC 27601 | | endment, [] Filed(MM/I | | Y) _X_ Form filed by 0 | 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) | | | | | | | | | |
| | | Tabl | | | ive Securities Benefic | ially Owned | | | | |
| 1.Title of Security (Instr. 4) | | | Be | 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) | | | |
| Table | II - Derivative | Securities | Beneficiall | y Own | ed (<i>e.g.</i> , puts, calls, w | arrants, options | s, convertible secu | urities) | | |
| (Instr. 4) | | nd Expirati | | | le and Amount of rities Underlying vative Security : 4) | 4. Conversion or Exercise Price of Derivative | 5. Ownership Form of Derivative Security: Direct (D) or | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | 1- | Date Exercisable | ate Expiration xercisable Date | | Amount or Number o Shares | Security f | Indirect (I) (Instr. 5) | | | |

Explanation of Responses:

No securities are beneficially owned.

Reporting Owners

| Donouting Orymon Nomes / Address | Relationships | | | | |
|-------------------------------------|---------------|-----------|---------|-------|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | |
| Todd Candice W | | | | | |
| 150 FAYETTEVILLE STREET, SUITE 1400 | X | | | | |
| RALEIGH, NC 27601 | | | | | |

Signatures

/s/ Jeffrey D. Miller Attorney in fact for Candice W. Todd

Signature of Reporting Person

2/7/2024

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 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.

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.