Shah Neil H Form 4 August 30, 2017

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

January 31, Expires: 2005

297,418

299,085

300,473

\$ 17.86

\$ 17.99

D

D

D

Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section See Instruction

30(h) of the Investment Company Act of 1940

1(b).

Class A Common Shares of

Beneficial Interest Class A Common Shares of

Beneficial Interest Class A

Common

08/28/2017

08/29/2017

08/30/2017

(Print or Type Responses)

1. Name and Address of Reporting Person * Shah Neil H			2. Issuer Name and Ticker or Trading Symbol HERSHA HOSPITALITY TRUST [HT]			Is	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (N		3. Date of Earliest Transaction (Month/Day/Year)				Director _X Officer (give to		Owner r (specify	
44 HERSHA DRIVE			08/28/2017			De	below) below) President and COO			
(Street)			4. If Amendment, Date Original			6	6. Individual or Joint/Group Filing(Check			
		File	d(Month/Day/Year))			Applicable Line) X_ Form filed by On	1 0		
HARRISBU	JRG, PA 17102					P	Form filed by Mo erson	ore than One Rep	porting	
(City)	(State)	(Zip)	Table I - Non-D	erivative (Securiti	es Acqui	red, Disposed of,	or Beneficiall	y Owned	
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securit		` ′	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution Da		•			Securities	Ownership	Indirect	
(Instr. 3)		any	Code	(Instr. 3,	4 and 5)		Beneficially	Form:	Beneficial	
		(Month/Day/	ear) (Instr. 8)				Owned Following	Direct (D) or Indirect	Ownership (Instr. 4)	
							Reported	(I)	(Instr. 1)	
					(A)		Transaction(s)	(Instr. 4)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)			

P

P

P

1,110 A

1,667

1,388

A

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Shares of Beneficial Interest

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

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	tionNumber	Expiration D	ate	Amou	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivativ	e		Securi	ties	(Instr. 5)
	Derivative				Securities	S		(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									A	
									Amount	
						Date	Expiration		or	
						Exercisable	isable Date	Title Number		
				C 1 1	7. (A) (D)				of	
				Code V	V (A) (D)				Shares	

Dolotionchine

Reporting Owners

Reporting Owner Name / Address	iciationships						
	Director	10% Owner	Officer	Other			

Shah Neil H

44 HERSHA DRIVE President and COO

HARRISBURG, PA 17102

Signatures

Ashish R. Parikh, as attorney-in-fact 08/30/2017

**Signature of Reporting Person Date

Reporting Owners 2

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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 Reporting Person disclaims beneficial ownership of these securities, as this report shall not be deemed an admission that the Reporting Person is the beneficial owner of these securities for purposes of Section 16 or any other purpose.

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.