#### HERSHA HOSPITALITY TRUST

Form 4

Common

November 07, 2014

<b>FORM</b>	I <b>/</b> I								OMB AF	PROVAL		
	Washington, D.C. 20549							OMB Number:	3235-0287			
	Check this box						Expires:	January 31,				
if no longer subject to Section 16.  STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Estimated average burden hours per response 0.5					
Form 4 or												
Form 5 obligation may continued See Instruction 1(b).	s Section	17(a) of the		ility Hold	ing Comp	any A	act of	Act of 1934, 1935 or Section	ı			
(Print or Type F	Responses)											
1. Name and Address of Reporting Person * Shah Neil H			Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol HERSHA HOSPITALITY TRUST					5. Relationship of Reporting Person(s) to Issuer			
			[HT]					(Check	all applicable	)		
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	nsaction			Director		Owner		
			(Month/D	•			- 1	X Officer (give title Other (specify below)				
44 HERSHA	ADRIVE		11/06/20	)14					dent and COO			
	(Street)		4. If Amer	ndment, Dat	e Original		(	6. Individual or Joi	nt/Group Filin	g(Check		
			Filed(Mon	th/Day/Year)				Applicable Line) _X_ Form filed by O	ne Reporting Per	rson		
HARRISBU	RG, PA 1710	2					-	Form filed by M Person				
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative Se	curitie	s Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Yo	ear) Execution	med 3. 4. Securities Acquiring Date, if Transaction(A) or Disposed of Code (Instr. 3, 4 and 5)  Day/Year) (Instr. 8)  (A)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount		Price	(Instr. 3 and 4)				
Class A Common Shares of Beneficial Interest	11/06/2014			S	300,000		\$ 7.33	2,188,742	D			
Class A Common Shares of Beneficial Interest	11/06/2014			S	1,400	D	\$ 7.4	2,187,342	D			
Class A	11/07/2014			S	198,600	D	\$	1,988,742	D			

7.35

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Shares of Beneficial

Interest

Class A By Neil Common and Juhi Shares of I Shah 2008 300,000 Beneficial Family Interest Trust

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control

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

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	Execution Date, if	4. Transactio		6. Date Exerc Expiration D	ate	7. Title a	of	8. Price of Derivative	9. Nu Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underlyi	_	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative			Securitie		(Instr. 5)	Bene
	Derivative Security				Securities		(Instr. 3 and 4)	and 4)		Own	
					Acquired					Follo	
					(A) or						Repo
					Disposed						Trans
					of (D)				(Instr		
					(Instr. 3,						
					4, and 5)						
								Aı	mount		
								or			
						Date Exercisable	Expiration Date		umber		
								of			
				Code V	(A) (D)				nares		

# **Reporting Owners**

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

Shah Neil H

44 HERSHA DRIVE President and COO

HARRISBURG, PA 17102

**Signatures** 

/s/ Ashish R. Parikh, as 11/07/2014 attorney-in-fact

\*\*Signature of Reporting Person Date

2 Reporting Owners

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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).

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.