ELSZTAIN EDUARDO S

Form 4 June 03, 2011

FORM 4

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

OMB APPROVAL OMB

Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

response...

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Form 4 or Form 5 obligations may continue.

Check this box

if no longer

subject to

Section 16.

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

SECURITIES

30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * ELSZTAIN EDUARDO S

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Issuer

HERSHA HOSPITALITY TRUST

[HT]

06/01/2011

Symbol

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)

_X__ Director Officer (give title below)

X__ 10% Owner Other (specify

HERSHA HOSPITALITY TRUST, 510 WALNUT STREET, 9TH FLOOR

(Street)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

Form filed by One Reporting Person _X_ Form filed by More than One Reporting

Person

PHILADELPHIA, PA 19106

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed

(Month/Day/Year) Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned Following

Ownership Form: Direct (D) or Indirect

Indirect Beneficial Ownership (Instr. 4)

7. Nature of

(A)

(D)

A

\$0

Reported (I) Transaction(s)

(Instr. 4)

(Instr. 3 and 4) Price

CLASS A

COMMON SHARES OF 06/01/2011 3,800

Code V Amount

22,960

D

BENEFICIAL

INT

CLASS A

COMMON See SHARES OF Footnote 15,584,069 Ι **BENEFICIAL** (2)

 $A^{(1)}$

INT

1

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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 | isable and | 7. Titl | le and | 8. Price of | - 1 |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------|-----------------|---------|----------|-------------|-----|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transacti | orNumber | Expiration Da | ite | Amou | ınt of | Derivative |] |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Under | rlying | Security | |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative | e | | Secur | ities | (Instr. 5) | |
| | Derivative | | | | Securities | | | (Instr. | 3 and 4) | | |
| | Security | | | | Acquired | | | | | |] |
| | | | | | (A) or | | | | | |] |
| | | | | | Disposed | | | | | | |
| | | | | | of (D) | | | | | | |
| | | | | | (Instr. 3, | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | | | | | Amount | | |
| | | | | | | Date | Evaluation | | or | | |
| | | | | | | | Expiration Date | Title | Number | | |
| | | | | | | | | | of | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | |
|---|----------|---------------|---------|-------|--|--|--|
| reporting o with runner runners | Director | 10% Owner | Officer | Other | | | |
| ELSZTAIN EDUARDO S HERSHA HOSPITALITY TRUST 510 WALNUT STREET, 9TH FLOOR PHILADELPHIA, PA 19106 | X | X | | | | | |
| Ifis LTD MINTFLOWER PLACE, 4TH FLOOR 8 PAR-LA-VILLE ROAD HAMILTON, D0 HM 08 | | X | | | | | |
| INVERSIONES FINANCIERAS DEL SUR STOCK CORP RUTA 8, 17,500, EDIFICIO @3, LOCAL 003 MONTEVIDEO, X3 CP 91609 | | X | | | | | |
| Agrology Stock Corp MORENO 877, 21ST FLOOR BUENOS AIRES, C1 | | X | | | | | |
| TYRUS STOCK CORP COLONIA 810, OF. 403 MONTEVIDEO, X3 CP 11000 | | X | | | | | |
| Idalgir Stock Corp ZABALA 1422, 2ND FLOOR | | X | | | | | |

Reporting Owners 2

MONTEVIDEO, X3

JIWIN STOCK CORP

COLONIA 810, OFFICE 403 X

MONTEVIDEO URUGUAY

REAL ESTATE INVESTMENT GROUP III LP

CLARENDON HOUSE, 2 CHURCH STREET X

HAMILTON HM CX

Signatures

| /s/ Eduardo S. Elsztain | 06/03/2011 | | | | |
|---|------------|--|--|--|--|
| **Signature of Reporting Person | Date | | | | |
| /s/ Eduardo S. Elsztain, Chairman of the Board for IFIS Limited | | | | | |
| **Signature of Reporting Person | Date | | | | |
| /s/ Eduardo S. Elsztain, Chairman of the Board for Inversiones Financieras del Sur S.A. | | | | | |
| **Signature of Reporting Person | Date | | | | |
| /s/ Alejandro G. Elsztain, Chairman of the Board for Agrology S.A. | | | | | |
| **Signature of Reporting Person | Date | | | | |
| /s/ Eduardo S. Elsztain, Chairman of the Board for Tyrus S.A. | | | | | |
| **Signature of Reporting Person | Date | | | | |
| /s/ Eduardo S. Elsztain, Chairman of the Board for Idalgir S.A. | | | | | |
| **Signature of Reporting Person | Date | | | | |
| /s/ Eduardo S. Elsztain, Chairman of the Board for Jiwin S.A. | 06/03/2011 | | | | |
| **Signature of Reporting Person | Date | | | | |
| /s/ Eduardo S. Elsztain, Chairman of the Board of Jiwin S.A., General Partner for Real Estate Investment Group III LP | 06/03/2011 | | | | |

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).

**Signature of Reporting Person

(1) Hersha Hospitality Trust issued 3,800 Class A Common shares of Beneficial Interest to each of its Independent Trustees on June 1st, 2011 pursuant to its 2008 Equity Incentive Plan.

Date

(2) Please see Exhibit.

Remarks:

Form 2 of 2.

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.

Signatures 3