Edgar Filing: PATEL KIRAN P - Form 4

| PATEL KIRA Form 4 | AN P | | | | | | | | | |
|---|--|--|---|--------------|--------------------------------|------------------------------------|--|--|---|--|
| November 14 | 4, 2008 | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | | APPROVAL | |
| Check thi | s box | V | ashington, | , D.C. 205 | 549 | | | Number: | 3235-0287 | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer 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 30(h) of the Investment Company Act of 1940 | | | | | | Estimated burden ho response | Estimated average burden hours per response 0. | | | |
| (Print or Type R | esponses) | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> PATEL KIRAN P | | | 2. Issuer Name and Ticker or Trading Symbol HERSHA HOSPITALITY TRUST [HT] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| | OSPITALITY) WALNUT STI | (Mont 11/13 | e of Earliest Tr h/Day/Year) 5/2008 | ransaction | | | X Director Officer (give below) | e title10 below) | 0% Owner ther (specify | |
| | (Street) 4. If Amendmer Filed(Month/Day | | | - | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| PHILADEL | PHIA, PA 1910 | 6 | | | | | Person | More than One | Reporting | |
| (City) | (State) | (Zip) T | able I - Non-I | Derivative S | Securi | ties Acq | uired, Disposed o | of, or Benefic | ially Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | e 2A. Deemed Execution Date, any (Month/Day/Yea | Code ur) (Instr. 8) | (Instr. 3, 4 | sposed 4 and 5 (A) or | of (D) 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Class A Common Shares of Beneficial Interest | 11/13/2008 | | Code V P | Amount | (D) A | Price \$ 3.13 | 146,000 | I | By family partnership Kunj Associates | |

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

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number.

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

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. 6. Date Exercisable at ionNumber Expiration Date of (Month/Day/Year)) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | | ate | Amo Unde Secur | le and unt of rlying rities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|----------------------|--|---|--|
| Repo | rting O | wners | Code V | 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| PATEL KIRAN P HERSHA HOSPITALITY TRUST 510 WALNUT STREET, 9TH FLOOR PHILADELPHIA, PA 19106 | х | | | | | | | |
| Signatures | | | | | | | | |
| Ashish R. Parikh as attorney-in-fact for Patel | 11/14/2008 | | | | | | | |
| **Signature of Reporting Person | | Date | | | | | | |

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.