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JOHNSON R	ROBERT L											
Form 4												
August 22, 20	017											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
	• • UNITE	D STATES					NGE (COMMISSION		3235-0287		
Check thi	s box		was	hington,	D.C. 20:	549			Number:	January 31,		
if no long	er STAT	EMENT O	Е СНАМ	CES IN I	PENIFFI	CIA		NERSHIP OF	Expires:	2005		
subject to			T CHAN	SECUR		CIA			Estimated average			
Section 10 Form 4 or				SECOR	11125				burden hours per response 0.4			
Form 5		pursuant to	Section 1	6(a) of the	e Securiti	ies E	xchang	ge Act of 1934,	165p01156	0.0		
obligation	¹⁸ Section	-					-	f 1935 or Sectio	n			
may conti <i>See</i> Instru	inue.			vestment	•	- ·						
1(b).												
(Print or Type R	lesponses)											
1 Name and A	ddress of Report	ing Person *	2 Iaguar	Name and	Tielsen on '	Tradin	~	5. Relationship of	Reporting Per	son(s) to		
IOINIGON DODEDTI			Symbol	Ivanie anu	TICKET OF	naum	ıg	Issuer	reporting ren	501(5) 10		
			-	lging Tru	st [RLI]							
(Least)	(First)	(Middle)		0 0				(Chec	ck all applicable	e)		
(Last)	(First)	(Middle)	3. Date of (Month/D	Earliest Tra	ansaction			X Director	10%	Owner		
C/O RLJ LODGING TRUST, 3 08/18/2				•				XOfficer (give titleOther (specify				
	METRO CE		00,10,2					below)	below) cutive Chairmar			
SUITE 1000)							Exec	utive Chairman	I		
	(Street)		4. If Ame	ndment, Dat	te Original			6. Individual or Jo	oint/Group Filir	1g(Check		
			th/Day/Year)	-			Applicable Line)					
								_X_Form filed by (
BETHESDA	A, MD 20814							Person	More than One Re	eporting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction	Date 2A. Dee		3.				5. Amount of	6. Ownership	-		
Security	(Month/Day/Ye							Securities	Form: Direct Indirect (D) or Benefic	Indirect		
(Instr. 3)		any	Code (D)			Beneficially	Beneficial					
(Month			(Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Owned Following		Ownership (Instr. 4)		
						()		Reported	(()		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Shares	08/18/2017			F	782 <u>(1)</u>	D	\$ 19.7	1,201,287	D			
Siluios							17.7					

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.

 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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships							
	Direc	ctor	10% Owner	Officer	Other				
JOHNSON ROBERT L C/O RLJ LODGING TRUST 3 BETHESDA METRO CENTER, SUITE 1 BETHESDA, MD 20814	000 ^{>}	ζ		Executive Chairman					
Signatures									
/s/ Anita Cooke Wells, Attorney-in-Fact	08/22/2017	7							
**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).
- (1) Reflects common shares surrendered to the Issuer to satisfy tax withholding obligations in connection with the vesting of restricted common shares.

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.