## Edgar Filing: HOSPITALITY PROPERTIES TRUST - Form 4

HOSPITALIT Form 4 May 25, 2016	TY PROPERTIE:	S TRUS	Г									
FORM	Δ									OMB APPROVAL		
Check this	UNITEDS	ITIES AND EXCHANGE CC hington, D.C. 20549				COMMISSION	OMB Number:	3235-0287				
if no longer subject to Section 16. Form 4 or	r STATEM		GES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: January 3 200 Estimated average burden hours per response 0				
Form 5 obligations may contir <i>See</i> Instruc 1(b).	Section 17(a	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										
(Print or Type Re	esponses)											
LAMKIN WILLIAM A Syr			2. Issuer Name <b>and</b> Ticker or Trading Symbol HOSPITALITY PROPERTIES				Ş	5. Relationship of Reporting Person(s) to Issuer				
		TRUST [NYSE: HPT]				(Check all applicable)						
(Last)(First)(Middle)3. Date of (Month/Date)C/O REIT MANAGEMENT & RESEARCH LLC, TWO NEWTON05/25/20PL., 255 WASH. ST., STE. 30005/25/20								_X_Director10% Owner Officer (give titleOther (specify below) below)				
	(Street)		4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
Filed(Mont NEWTON, MA 02458				Ionth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State) (	Zip)	<b>T</b> 11		• • • •	• /			е <b>ъ</b> е і і			
	. , .						ies Acq	uired, Disposed of		-		
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common Shares of Beneficial Interest	05/25/2016			Code V	Amount 2,500	(D) A	Price ( <u>1</u> )	20,000	D			

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.

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships					
	Director	10% Owner	Officer	Other			
LAMKIN WILLIAM A C/O REIT MANAGEMENT & RESEARCH LLC TWO NEWTON PL., 255 WASH. ST., STE. 300 NEWTON, MA 02458	Х						
Signatures							
/s/ William A.							

Lamkin 05/25/2016 <u>\*\*Signature of Date</u> Reporting Person

## **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) Transaction reported is grant of shares pursuant to Issuer's equity compensation plan.

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.