FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Sect	ion 30(n) of the I	nvestmer	it Com	ipany Act	of 19	940					
1. Name and Address of Reporting Person*  RYAN JOSEPH J					2. Issuer Name <b>and</b> Ticker or Trading Symbol RLJ Lodging Trust [ RLJ ]							. Relationsh Check all ap X Dire	plicable)	g Person(s) to	ssuer	
	(Fi	TRUST	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/04/2012									er (give title	Other (specify below)	
(Street) BETHES	SDA M		20814	00	4. If Am	endment, Date o	of Original	Filed	(Month/Da	ay/Ye	ear)		ine) X Forr	n filed by One n filed by Moi	o Filing (Check of Percenting Per	son
(City)	(30	, ,	zip) e I - Nor	ı-Deriv	ative Se	curities Acc	quired,	Disp	osed o	of, o	r Bene	ficia	ally Own	ed		
1. Title of Security (Instr. 3) 2. Transa Date			saction (Day/Year)	Execution Date,		, Transaction Disposed Code (Instr. 5)		rities Acquired (A ed Of (D) (Instr. 3,			nd Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	Amount		(A) or (D)	Price	Trans	action(s) 3 and 4)		(1130.4)	
Common Shares 05/04/				4/2012		A		3,968	3	A \$0		0 2	24,052	D		
		Та				urities Acqu s, warrants,										
Derivative Conversion Security Or Exercise (Month/Day/Year) Execution Date, if any		4. Transactio Code (Inst 8)		Expiration Date AI (Month/Day/Year) Se UI DE Se			Amount of Der Securities Sec		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Date Exercisable Expiration Date

**Explanation of Responses:** 

Remarks:

/s/ Anita Cooke Wells, Attorney-in-Fact

Amount or Number

of Shares

Title

\*\* Signature of Reporting Person Date

05/08/2012

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

- $^{\star}$  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).

Code

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

(A) (D)