FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OIVIB AP	PROVAL
OMB Number:	3235-028

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 Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person* JOHNSON ROBERT L					2. Issuer Name and Ticker or Trading Symbol RLJ Lodging Trust [RLJ]									(Che	elationship o eck all applic C Directo	able)	g Pers	son(s) to Iss 10% Ov		
(Last)	(FI	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/31/2019									_ ;	below)	(give title Executive	c Cha	Other (s below) irman	specify
3 BETHESDA METRO CENTER, SUITE 1000																				
(Street)	SDA M	D	20814		- 4.	4. If Amendment, Date of Original Filed (Month/Day/Ye					Jay/Year)		Line	dividual or Joint/Group Filing (Check Applicable) K Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)			Person														
		Tab	le I - No	n-Deriv	/ativ	e Se	curiti	ies A	cqu	ired, C	Dis	posed	of, or E	Bene	eficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		9, 7	Transaction Dispose Code (Instr.			ities Acqu d Of (D) (I			Benefici Owned F	es ally Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								G	Code	,	Amount	t (A) or Pri		Price	Transact	Reported Transaction(s) (Instr. 3 and 4)				
Common	mmon Shares 10/31/201			/2019	9				F		14,699 ⁽¹⁾ D S		\$16.5	5 1,19	,198,529		D			
		٦	Гable II -	Deriva (e.g., p	itive outs,	Seci call:	uritie s, wa	s Acc rrant	quir ts, o	ed, Di	spo s, c	osed o	f, or Be ible se	nef curi	icially ties)	Owned				
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. Transactic Code (Inst 8)		on of		Expi	ate Exerc iration Day/\ nth/Day/\	ate	of Securities		ties ng e Sec	curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer	e rcisable	Ex Da	piration te	Title	or Nu	nount mber Shares					
OP Units	(2)									(3)		(3)	Common Stock	33	5,250		335,25	0	D	

Explanation of Responses:

- 1. Reflects common shares surrendered to the Issuer to satisfy tax withholding obligations in connection with the vesting of restricted common shares.
- 2. "OP Units" represent limited partner interests of RLJ Lodging Trust, L.P., the operating partnership (the "OP") of the Issuer, of which the Issuer is the sole general partner. OP Units are redeemable beginning one year after the date of issuance for cash equal to the then current market value of one common share of the Issuer, an equal number of common shares of the Issuer.
- 3. All of these OP Units are immediately redeemable (subject to certain limitations set forth in the agreement of limited partnership of the OP). OP Units have no expiration date.

Remarks:

/s/ Anita Cooke Wells, 11/04/2019 Attorney-in-Fact

** Signature of Reporting Person

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

- * 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.

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.