FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL        |          |  |  |  |  |  |  |  |
|---------------------|----------|--|--|--|--|--|--|--|
| OMB Number:         | 3235-028 |  |  |  |  |  |  |  |
| Estimated average I | nurden   |  |  |  |  |  |  |  |

0.5

hours per response:

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

|   |  |  |  |                | 01 3  | ecuo   | 11 30(11)   | or the r | nvesime                              | III COI              | прапу Аст                                  | 01 19  | 940            |                      |   |                            |  |   |   |  |
|---|--|--|--|----------------|---|--|---|----------|--------------------------------------|----------------------|--|--|----------------|----------------------|---|----------------------------|--|---|---|--|
| 1. Name and Address of Reporting Person* <u>Gormsen Christopher Andrew</u>        |  |  |  |                |   | 2. Issuer Name <b>and</b> Ticker or Trading Symbol RLJ Lodging Trust [ RLJ ] |   |          |                                      |                      |  |  |                |                      | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner |                            |  |   |   |  |
| (Last) (First) (Middle) C/O RLJ LODGING TRUST 3 BETHESDA METRO CENTER, SUITE 1000 |  |  |  |                | 3. Date of Earliest Transaction (Month/Day/Year) 05/07/2017 |  |   |          |                                      |                      |  |  |                |                      | X Officer (give title below)  Chief Acco  |                            |  | Other (specify below) unting Officer    |   |  |
| (Street) BETHESDA MD 20814  (City) (State) (Zip)                                  |  |  |  |                | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |  |   |          |                                      |                      |  |  |                |                      | . Indivi  | Form                       | al or Joint/Group Filing (Check Applicable  orm filed by One Reporting Person  orm filed by More than One Reporting  erson |   |   |  |
|   |  | Tabl                                       | e I - Nor                                    | n-Deriv        | ative   | Sec  | curitie   | s Acc    | quired,                              | Dis                  | posed o                                    | f, o   | r Ben          | efici                | ally C  | Owne                       | ed   |   |   |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)                     |  |  |  |                | ay/Year) if a   |  | 2A. Deemed<br>Execution Date,<br>f any<br>Month/Day/Year) |          | Transaction Disposed Code (Instr. 5) |                      | ties Acquired (A)<br>d Of (D) (Instr. 3, 4 |  |                | 4 and Se<br>Be<br>Ov |   | Securities<br>Beneficially |  | nership<br>Direct<br>Indirect<br>tr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |  |  |  |                |   |  |   |          | Code                                 | v                    | Amount                                     |  | (A) or<br>(D)  | Price                | . [   | Transa                     | action(s)<br>3 and 4)  |   |   | (msu. 4)   |
| Common Shares 05/0  |  |  |  |                | /2017   |  |   | F        |                                      | 123 <sup>(1)</sup> D |  | D  | \$21           | .53                  | 25,031  |                            | ]  | D                                       |   |  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |  |                |   |  |   |          |                                      |                      |  |  |                |                      |   |                            |  |   |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                               | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deem<br>Execution<br>if any<br>(Month/Da | Date, Transact |   |  |   |          | 6. Date E<br>Expiratio<br>(Month/D   | n Dat                |  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instrand 4) |                |                      |   |                            | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4)    | Ow<br>For<br>Dir<br>or I<br>(I) (       | vnership<br>rm:<br>rect (D)<br>Indirect<br>(Instr. 4)             | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |  |  |  |                | Code  | V  | (A) (D)   |          | Date<br>Exercisa                     |                      | Expiration<br>Date                         | Title  | or<br>Nu<br>of | nount<br>mber        |   |                            |  |   |   |  |

## **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.

## Remarks:

/s/ Anita Cooke Wells, Attorney-in-Fact 05/09/2017

\*\* Signature of Reporting Person Date

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).

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.