## Edgar Filing: GOLDSMITH C GERALD - Form 4

GOLDSMIT Form 4	TH C GERALD											
January 16, 2	2018											
FORM	14									OMB AF	PROVAL	
	UNITE	D STATES				ND EX( D.C. 20		NGE C	COMMISSION	OMB Number:	3235-0287	
Check th if no long	ner									Expires:	January 31, 2005	
subject to	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP C							NERSHIP OF	Estimated average			
	Section 16. SECURITIES Form 4 or								burden hours per response 0.5			
Form 5	Filed p	ursuant to	Section 1	6(a) of	the	e Securit	ies E	xchang	e Act of 1934,	16500156	0.5	
obligatio may cont				•		•	· ·		1935 or Section	ı		
See Instruction 1(b).		30(h)	of the In	vestme	nt (	Compan	y Ac	t of 194	0			
(Print or Type I	Responses)											
			Symbol	Issuer Name <b>and</b> Ticker or Trading ıbol					5. Relationship of Reporting Person(s) to Issuer			
Cha				n Lodg	ing	g Trust [0	CLD	Γ]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of			ansaction					0	
222 LAKEV 200	VIEW AVENU	E, SUITE	(Month/D 01/16/2	-	)				X Director Officer (give t below)		Owner er (specify	
	(Street)		4. If Ame	ndment.	Dat	e Origina	l		6. Individual or Jo	int/Group Filin	g(Check	
				(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person			
WEST PAL	LM BEACH, FI	. 33401							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Nor	1-De	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ned3.4. Securities Acquiredn Date, ifTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5)Day/Year)(Instr. 8)			d of (D)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)					
				Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	· · · · · · · · · · · · · · · · · · ·		
Common Shares	01/16/2018			А		2,167	A	\$ 23.08	21,328	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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title Deriva Securi (Instr.	ative ity	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. tionNumber of ) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Title Amoun Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code N	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
GOLDSMITH C GERALD 222 LAKEVIEW AVENUE SUITE 200 WEST PALM BEACH, FL 33401	Х							
Signatures								
/s/ Dennis M. Craven, as Attorney in Fact	01/16/2018							
**Signature of Reporting Person		Date						
Evaluation of Possonancos								

## **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).

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.