## Edgar Filing: INNSUITES HOSPITALITY TRUST - Form 4

Form 4	HOSPITALITY	Y TRUST									
May 24, 2016	5										
FORM	4					~~~ .		<b></b>	OMB A	PROVAL	
Check thi	UNITED	) STATES		ATTIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
if no long	er			and nu					Expires:	January 31, 2005	
subject to Section 10 Form 4 or	F CHANGES IN BENEFICIAL OWNERSHIP ( SECURITIES						Estimated average burden hours per response 0.				
Form 5 obligation may conti <i>See</i> Instru 1(b).	nue. Section 17	(a) of the		ility Hold	ling Con	npany	y Act of	Act of 1934, 1935 or Sectior 0			
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> Barnhill Pamela J			2. Issuer Name <b>and</b> Ticker or Trading Symbol INNSUITES HOSPITALITY					5. Relationship of Reporting Person(s) to Issuer			
			TRUST					(Check all applicable)			
(Last) (First) (Middle) 3. Dat				Earliest Tr ay/Year)	ansaction			_X_ Director 10% Owner _X_ Officer (give title Other (specify			
	ITES HOSPITA 25 E. NORTHE SUITE 105		05/20/20	-				below) President,CC	below) 00&Vice-Chai	rperson	
	(Street)	Amendment, Date Original Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>					
PHOENIX,	AZ 85020							Form filed by M	ore than One Re	porting Person	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acqu	iired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deem Execution any (Month/D		n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8) (A)			d of (D)	5. Amount of Securities6.BeneficiallyForm:OwnedDirect (DFollowing Reportedor IndirectTransaction(s)(Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Shares of				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Beneficial Interest, without par value	05/20/2016			Р	400	A	\$ 2.5	12,449	I	By Sean (Child)	
Shares of Beneficial Interest, without par value	05/20/2016			Р	2,000 (1)	A	\$ 2.4883	246,436	D		

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Shares of							
Beneficial			2 000		¢		
Interest, without par value	05/20/2016	Р	3,000 (1)	А	\$ 2.4999	249,436	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 of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	'Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	Title	Number		
						Exercisable	Date	The	of		
				Code V	(A) (D)				Shares		
					$(\mathbf{D})$				Shures		

### **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships							
	reporting owner rame / Address			Officer	Other				
Barnhill Pamela J C/O INNSUITES HOSPITALITY TRUST 1625 E. NORTHERN AVENUE, SUITE 105 PHOENIX, AZ 85020		Х		President,COO&Vice-Chairperson					
Signatures									
/s/ Adam B. Remis	05/24/2016								
<u>**</u> Signature of Reporting Person	Date								
Explanation of	of Resnanses								

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).

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(1) These shares will vest immediately but are considered controlled stock subject to Rule 144 with no holding period requirements. These shares were bought as part of the approved bonus by the IHT Compensation Committee.

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.