LaSalle Hotel Properties Form 4 May 04, 2010

Check this box

if no longer

Section 16.

subject to

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

3235-0287

January 31, 2005

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * HARTLEY LEONARD DARRYL

2. Issuer Name and Ticker or Trading Symbol

LaSalle Hotel Properties [LHO]

5. Relationship of Reporting Person(s) to Issuer

below)

(Last) (First) 3. Date of Earliest Transaction

(Check all applicable) _X__ Director 10% Owner Other (specify Officer (give title

C/O LASALLE HOTEL PROPERTIES, 3 BETHESDA METRO CENTER, SUITE 1200

(Street)

(State)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

(Month/Day/Year)

05/03/2010

X Form filed by One Reporting Person Form filed by More than One Reporting Person

(Zip)

(Middle)

BETHESDA, MD 20814

(City)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned
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1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired or(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Shares of Beneficial Interest	05/03/2010		M	5,000	A	\$ 16.51	14,836	D	
Common Shares of Beneficial Interest	05/03/2010		M	5,000	A	\$ 14.88	19,836	D	
Common Shares of Beneficial	05/03/2010		S	19,836	D	\$ 26.99	0	D	

of

Interest

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.

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

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 (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day	Pate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Share Option (right to buy)	\$ 16.51	05/03/2010		M	5,000	(1)	05/16/2011	Common Shares of Beneficial Interest	5,000
Share Option (right to buy)	\$ 14.88	05/03/2010		M	5,000	(2)	05/15/2012	Common Shares of Beneficial Interest	5,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
HARTLEY LEONARD DARRYL C/O LASALLE HOTEL PROPERTIES 3 BETHESDA METRO CENTER, SUITE 1200 BETHESDA, MD 20814	X					
Signatures						
/s/ Hans S. Weger, as Attorney-in-Fact for Darryl Hartley-Leonard			05/04/2	010		

**Signature of Reporting Person

Reporting Owners 2

Date

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).
- (1) Share options vested one-third on January 1st of each subsequent calendar year after the date of grant, which was May 16, 2001.
- (2) Share options vested one-third on January 1st of each subsequent calendar year after the date of grant, which was May 15, 2002.
- (3) Please refer to the exercise price in Table II, Column 2.

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.