## Edgar Filing: Smith Gordon - Form 4

Smith Gordon

Form 4 June 16, 2009	0												
									OMB APPROVAL				
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287				
Check this box if no longer				GES IN BENEFICIAL OWNERSHIP O SECURITIES					NERSHIP OF	Expires: January 3 20 Estimated average burden hours per response 0			
Form 5 obligation may cont <i>See</i> Instru 1(b).	inue. Section 17(	a) of the l		ility Ho	oldir	ng Com	ipany	Act of	e Act of 1934, 1935 or Section 0				
(Print or Type F	Responses)												
Smith GordonSymbolCHOIC				r Name <b>and</b> Ticker or Trading E HOTELS NATIONAL INC /DE [CHH]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Month/			3. Date of (Month/D) 06/12/20	-					_X_ Director Officer (give below)	Officer (give title Other (specify			
				endment, Date Original onth/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
SILVER SP	RING, MD 2090	)1							Form filed by M Person	lore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-	-Der	vivative S	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio: any	ned n Date, if Day/Year)	3. Transact Code (Instr. 8)	tion(. (. )	A. Securit A) or Dia Instr. 3, 4	sposed	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	06/12/2009			A		1,253	A	\$ 25.23	20,687.4	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)

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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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Smith Gordon 10750 COLUMBIA PIKE SILVER SPRING, MD 20901	Х						
Signatures							
Sandy Michel, attorney in fact	06/16	/2009					

\*\*Signature of Reporting Person

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).

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.