### IRSA INVESTMENTS & REPRESENTATIONS INC

Form 4

CLASS A COMMON

INT

SHARES OF

BENEFICIAL

11/06/2009

November 25, 2009

November 25, 2	009										
FORM 4	1							OMB APP	ROVAL		
	Washington, D.C. 20549						MISSION	OMB Number:	3235-0287		
Check this bo if no longer								Expires:	January 31, 2005		
subject to Section 16. Form 4 or		SI	F CHANGES IN BENEFICIAL OW SECURITIES					Estimated ave burden hours response	erage		
Form 5 obligations may continue. See Instruction 1(b).  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											
(Print or Type Resp	onses)										
ELSZTAIN EDUARDO S Symbol							5. Relationship of Reporting Person(s) to Issuer				
		HERSHA HOSPITALITY TRUST [HT]					(Check all applicable)				
(Last)		irst) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)				_X_ Director _X_ 10% Owner Officer (give title Other (specify below)					
HERSHA HOSPITALITY 11/05/2009 TRUST, 510 WALNUT STREET, 9TH FLOOR											
	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person						
PHILADELPHIA, PA 19106  _X_ Form filed by More than One Reporting Person						orting					
(City)	(State) (Zip)	Table I -	Non-Deriv	vative Secu	rities A	cquired,	Disposed of,	or Beneficially	Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquir Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				5. Amount of Securities Beneficially Owned Following Reported	Ownership	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
CLASS A			Code V	Amount	(A) or (D)	Price	Transaction (Instr. 3 and	(s) (Instr. 4)			
COMMON SHARES OF BENEFICIAL INT	11/05/2009		P	17,265	A \$	3 2.558	6,226,852	I (1)	See Footnote		

See

(1)

Footnote

10,922 A  $\frac{\$}{2.5492}$  6,237,774 I  $\underline{(1)}$ 

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.

SEC 1474 (9-02)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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.	<ol><li>Date Exer</li></ol>	cisable and	7. Title	and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	ctionNumber	Expiration D	ate	Amoun	t of	Derivative
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Underly	ying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	<ol><li>B) Derivati</li></ol>	ve		Securiti	ies	(Instr. 5)
	Derivative				Securiti	es		(Instr. 3	3 and 4)	
	Security				Acquire	d				
					(A) or					
					Dispose	d				
					of (D)					
					(Instr. 3	,				
					4, and 5	)				
								,	Amount	
									or	
						Date	Expiration		Number	
						Exercisable	Date		of	
				Code	V (A) (D	)			Shares	

# **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner Officer Officer		Other		
ELSZTAIN EDUARDO S HERSHA HOSPITALITY TRUST 510 WALNUT STREET, 9TH FLOOR PHILADELPHIA, PA 19106	X	X				
CONSULTORES ASSETS MANAGEMENT STOCK CORP BOL??VAR 108, 1ST FLOOR BUENOS AIRES, C1				Chairman of the Board		
CONSULTORES VENTURE CAPITAL LTD REGATTA OFFICE PARK, P.O. BOX 31106, SMB GRAND CAYMAN, E9				Chairman of the Board		
CRESUD INC MORENO 877, 23RD FLOOR CIUDAD AUT??NOMA DE BUENOS AIRES, C1				Chairman of the Board		
CONSULTORES VENTURE CAPITAL URUGUAY STOCK CORP RUTA 8, 17,500, EDIFICIO @3, LOCAL 003 MONTEVIDEO, X3 CP 91609				Chairman of the Board		

Reporting Owners 2

AGROINVESTMENT STOCK CORP

COLONIA 810, OF, 803

MONTEVIDEO, X3 CP 11000

IRSA INVESTMENTS & REPRESENTATIONS INC

MORENO 877, 21ST FLOOR Chairman of the

CIUDAD AUT??NOMA DE Board

BUENOS AIRES, C1

Ifis LTD

MINTFLOWER PLACE, 4TH FLOOR Chairman of the

8 PAR-LA-VILLE ROAD Board

HAMILTON, D0 HM 08

INVERSIONES FINANCIERAS DEL SUR STOCK CORP

Chairman of the

RUTA 8, 17,500, EDIFICIO @3, LOCAL 003

MONTEVIDEO, X3 CP 91609

Agrology Stock Corp

MORENO 877, 21ST FLOOR

Chairman of the

BUENOS AIRES, C1

Board

**Signatures** 

/s/ Eduardo S. Elsztain 11/24/2009

\*\*Signature of Reporting Person Date

/s/ Eduardo S. Elsztain, Chairman of the Board for Consultores Assets Management S.A. 11/24/2009

\*\*Signature of Reporting Person Date

/s/ Eduardo S. Elsztain, Chairman of the Board for Consultores Venture Capital Limited 11/24/2009

\*\*Signature of Reporting Person Date

/s/ Eduardo S. Elsztain, Chairman of the Board for Cresud Sociedad An??nima Comercial,

Inmobiliaria, Financiera y Agropecuaria

\*\*Signature of Reporting Person Date

/s/ Eduardo S. Elsztain, Chairman of the Board for Consultores Venture Capital Uruguay 11/24/2009

\*\*Signature of Reporting Person Date

/s/ Eduardo S. Elsztain, Chairman of the Board for Agroinvestment S.A. 11/24/2009

\*\*Signature of Reporting Person Date

/s/ Eduardo S. Elsztain, Chairman of the Board for IRSA Inversiones y Representaciones

Sociedad An??nima

\*\*Signature of Reporting Person Date

/s/ Eduardo S. Elsztain, Chairman of the Board for IFIS Limited 11/24/2009

\*\*Signature of Reporting Person Date

/s/ Eduardo S. Elsztain, Chairman of the Board for Inversiones Financieras del Sur S.A. 11/24/2009

\*\*Signature of Reporting Person Date

Alejandro G. Elsztain, Chairman of the Board for Agrology S.A. 11/24/2009

\*\*Signature of Reporting Person Date

Signatures 3

## **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) Please see Exhibit.

#### **Remarks:**

Form 1 of 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.