Summit Hotel Properties, Inc.

Form 4 June 16, 2016

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

SECURITIES

OMB

Washington, D.C. 20549 Check this box STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

3235-0287 Number: January 31,

0.5

OMB APPROVAL

if no longer subject to Section 16. Form 4 or Form 5

Expires: 2005 Estimated average

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

burden hours per response...

may continue. See Instruction

obligations

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Addi Eng Christoph	*	rting Person *	2. Issuer Name and Ticker or Trading Symbol Summit Hotel Properties, Inc. [INN]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check an applicable)				
12600 HILL COUNTRY BLVD., SUITE R-100		BLVD.,	(Month/Day/Year) 06/16/2016	Director 10% Owner _X_ Officer (give title Other (specify below) See Remarks				
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check				
AUSTIN, TX			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acc	quired, Disposed of, or Beneficially Owned				

		Tubic 1 Non Delivative Securities Acquired, Disposed of, of Deliciteding Owned							
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securitie	es	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution Date, if	Transactio	onAcquired (A) or	Securities	Form: Direct	Indirect	
(Instr. 3)		any	Code	Disposed o	of (D)	Beneficially	(D) or	Beneficial	
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4	and 5)	Owned	Indirect (I)	Ownership	
						Following	(Instr. 4)	(Instr. 4)	
					(4)	Reported			
					(A)	Transaction(s)			
			Code V		or (D) Price	(Instr. 3 and 4)			
			Code v	Amount ((D) Flice				

Common	06/16/2016	F	556 (1) D	\$ 0	50 827	D
Stock	00/10/2010	1	330 <u>~</u> D	ψυ	37,627	D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration D	ate	Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A		
									Amount		
						Date	Expiration		or		
					Exercisable	Date		Number			
				~					of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Eng Christopher R. 12600 HILL COUNTRY BLVD., SUITE R-100 AUSTIN, TX

See Remarks

Signatures

/s/ Christopher

R. Eng 06/16/2016

**Signature of Person Date

Reporting Person

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) Represents shares of common stock surrendered to the Issuer to satisfy the reporting person's tax withholding obligations related to vesting of previously issued restricted common stock awards.

Remarks:

EVP, General Counsel, Chief Risk Officer & Secretary

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.

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