## Edgar Filing: CHOICE HOTELS INTERNATIONAL INC /DE - Form 4/A

CHOICE HOTELS INTERNATIONAL INC /DE

Form 4/A

November 12, 2	2014										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
•••••				N OMB Number:	3235-	0287					
Check this box if no longer subject to STATEMENT OF CHANGES IN BENEFICI.							WNERSHIP OF	Expires:		y 31, 2005	
Form 4 or	Section 16. SECURITIES								burden hours per response 0		
obligations may continu	Form 5 obligations may continue.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	ponses)										
1. Name and Adda Joyce Stephen	2. Issuer Name <b>and</b> Ticker or Trading Symbol CHOICE HOTELS				5. Relationship of Reporting Person(s) to Issuer						
			INTER	NATION	IAL INC	/DE [CHH	H] (Chi	eck all applicabl	e)		
				3. Date of Earliest Transaction (Month/Day/Year)			Director 10% Owner X Officer (give title Other (specify below) below)				
1 CHOICE HO	JIELS CIRCL	LE	11/06/2	2014			Pi	resident & CEO			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year) 11/10/2014			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>					
ROCKVILLE,	MD 20850						Form filed by Person	More than One R	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	ı	
	Transaction Date onth/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect Beneficia Ownershi (Instr. 4)	ıl	
Reminder: Report	on a separate line	for each cla	ass of sec	urities bene	ficially ow	ned directly (	or indirectly				
	en a separate int				Perso inforr requi	ons who res nation cont red to resp ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		

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. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	or D (D)	uired (A) Disposed of tr. 3, 4, 5)				
				Code V	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option	\$ 26.55	11/06/2014		М		9,057	<u>(1)</u>	05/01/2015	Common Stock	9,057
Employee Stock Option	\$ 26.55	11/07/2014		М		19,568	<u>(1)</u>	05/01/2015	Common Stock	19,568
Employee Stock Option	\$ 26.55	11/07/2014		М		100	(1)	05/01/2015	Common Stock	100

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Joyce Stephen P 1 CHOICE HOTELS CIRCLE ROCKVILLE, MD 20850			President & CEO					
Signatures								
Brot I Limage attorney								

Bret L. Limage, attorney 11/12/2014 in fact \*\*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).

(1) Options vested in four annual installments beginning on the May 1, 2008 grant date.

(2) Number of Derivative Securities Beneficially Owned Following Reported Transaction was erroneously reported as "0".

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.