

► See separate instructions.

Part I Reporting Issuer

| | | | |
|---|--|--|--|
| 1 Issuer's name <u>Pebblebrook Hotel Trust Inc</u> | | 2 Issuer's employer identification number (EIN) 27-1055421 | |
| 3 Name of contact for additional information ANDREW DITTAMO | | 4 Telephone No. of contact 240-507-1300 | |
| 5 Email address of contact INFO@PEBBLEBROOKHOTELS.COM | | 6 Number and street (or P.O. box if mail is not delivered to street address) of contact 4747 BETHESDA AVENUE, SUITE 1100 | |
| 7 City, town, or post office, state, and ZIP code of contact BETHESDA, MD 20814 | | 8 Date of action 04/15/2024, 07/15/2024, 10/15/2024 | |
| 9 Classification and description COMMON | | 10 CUSIP number 70509V100 | |
| 11 Serial number(s) N/A | | 12 Ticker symbol PEB | |
| 13 Account number(s) N/A | | | |

Part II **Organizational Action** Attach additional statements if needed. See back of form for additional questions.

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► THE COMPUTATION OF THE RETURN OF CAPITAL REPRESENTS DISTRIBUTIONS ASSOCIATED WITH THE 2024 TAX YEAR WHICH ARE IN EXCESS OF THE CURRENT AND ACCUMULATED EARNINGS AND PROFITS.

Part II **Organizational Action (continued)**

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ► IRC SECTION 301 (C) (2)

18 Can any resulting loss be recognized? ► NOT APPLICABLE

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ► **NOT APPLICABLE**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign
Here**

Signature ➤

name ► RAYMOND D. MARTZ

Date ►

1/29/2025

Print your name ► RAYMOND D. MARTZ

Title ► EVP AND CFO

| | | | | | |
|---------------------------------------|--|---|--------------------------|---|-------------------|
| Paid Preparer Use Only | Print/Type preparer's name STEVE LAWRENCE | Preparer's signature  | Date 1/29/2025 | Check <input type="checkbox"/> if self-employed | PTIN P01255335 |
| | Firm's name ► BDO USA | Firm's EIN ► 13-5381590 | | | |
| | Firm's address ► 10960 GRANTCHESTER WAY, SUITE 500, COLUMBIA, MD 21044 | Phone no. 410-997-0335 | | | |

► See separate instructions.

Part I Reporting Issuer

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|---|---------------------------------------|--|---|
| 1 Issuer's name <u>Pebblebrook Hotel Trust Inc</u> | | 2 Issuer's employer identification number (EIN) 27-1055421 | |
| 3 Name of contact for additional information ANDREW DIT'TAMO | | 4 Telephone No. of contact 240-507-1300 | 5 Email address of contact INFO@PEBBLEBROOKHOTELS.COM |
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| 8 Date of action 04/15/2024, 07/15/2024, 10/15/2024 | | 9 Classification and description PREFERRED E | |
| 10 CUSIP number 70509V100 | 11 Serial number(s) N/A | 12 Ticker symbol PEB PR E | 13 Account number(s) N/A |

Part II **Organizational Action** Attach additional statements if needed. See back of form for additional questions.

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► THE COMPUTATION OF THE RETURN OF CAPITAL REPRESENTS DISTRIBUTIONS ASSOCIATED WITH THE 2024 TAX YEAR WHICH ARE IN EXCESS OF THE CURRENT AND ACCUMULATED EARNINGS AND PROFITS.

Part II Organizational Action (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ► IRC SECTION 301 (C) (2)

18 Can any resulting loss be recognized? ► NOT APPLICABLE

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ► NOT APPLICABLE

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign
Here**

Signature ►

Raymond D. Martz

Date ►

1/29/2025

Print your name ► RAYMOND D. MARTZ

Title ► EVP AND CFO

| | | | | | |
|---------------------------------------|--|---|-------------------|---|-------------------|
| Paid Preparer Use Only | Print/Type preparer's name STEVE LAWRENCE | Preparer's signature  | Date 1/29/2025 | Check <input type="checkbox"/> if self-employed | PTIN P01255335 |
| | Firm's name ► BDO USA | Firm's EIN ► 13-5381590 | | | |
| | Firm's address ► 10960 GRANTCHESTER WAY, SUITE 500, COLUMBIA, MD 21044 | Phone no. 410-997-0335 | | | |

**Report of Organizational Actions
 Affecting Basis of Securities**

► See separate instructions.

Part I Reporting Issuer

| | | | |
|--|---|---|-----------------------------|
| 1 Issuer's name | | 2 Issuer's employer identification number (EIN) | |
| Pebblebrook Hotel Trust Inc | | 27-1055421 | |
| 3 Name of contact for additional information | 4 Telephone No. of contact | 5 Email address of contact | |
| ANDREW DITTAMO | 240-507-1300 | INFO@PEBBLEBROOKHOTELS.COM | |
| 6 Number and street (or P.O. box if mail is not delivered to street address) of contact | | 7 City, town, or post office, state, and ZIP code of contact | |
| 4747 BETHESDA AVENUE, SUITE 1100 | | BETHESDA, MD 20814 | |
| 8 Date of action | 9 Classification and description | | |
| 04/15/2024, 07/15/2024, 10/15/2024 | PREFERRED F | | |
| 10 CUSIP number | 11 Serial number(s) | 12 Ticker symbol | 13 Account number(s) |
| 70509V100 | N/A | PEB PR F | N/A |

Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.

14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ► PEBBLEBROOK HOTEL TRUST MADE CASH DISTRIBUTIONS ON APRIL 15, 2024, JULY 15, 2024 AND OCTOBER 15, 2024 TO EACH OF IT'S PREFERRED F SHAREHOLDERS. A PORTION OF EACH DISTRIBUTION REPRESENTED A NON TAXABLE DIVIDEND DISTIBUTION.

15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ► PREFERRED F SHAREHOLDERS WERE PAID THREE DISTRIBUTIONS. A PORTION OF EACH DISTRIBUTION REPRESENTED A RETURN OF CAPITAL WHICH REDUCED THE BASIS OF THE PREFERRED F SHARES. THE PERCENTAGE OF NON-TAXABLE DISTRIBUTION (RETURN OF CAPITAL) AND REDUCTION IN SHAREHOLDERS BASIS IS AS FOLLOWS:
 APRIL 15, 2024: 18.13%. THE BASIS OF EACH SHAREHOLDER'S PREFERRED SHARES SHOULD BE REDUCED BY \$0.071401 PER SHARE.
 JULY 15, 2024: 18.13%. THE BASIS OF EACH SHAREHOLDER'S PREFERRED SHARES SHOULD BE REDUCED BY \$0.071401 PER SHARE. OCTOBER 15, 2024: 18.13%. THE BASIS OF EACH SHAREHOLDER'S PREFERRED SHARES SHOULD BE REDUCED BY \$0.071401 PER SHARE.

16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► THE COMPUTATION OF THE RETURN OF CAPITAL REPRESENTS DISTRIBUTIONS ASSOCIATED WITH THE 2024 TAX YEAR WHICH ARE IN EXCESS OF THE CURRENT AND ACCUMULATED EARNINGS AND PROFITS.

Part II Organizational Action (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ► **IRC SECTION 301 (C) (2)**

18 Can any resulting loss be recognized? ► NOT APPLICABLE

19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ► NOT APPLICABLE

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign
Here**

Signature ►

RAYMOND D. MARTZ
Name ► *Raymond D. Martz*
Title/Type preparer's name

Date ►

1/21/2021

Print your name ► RAYMOND D. MARTZ

Title ► EVP AND CFO

**Paid
Preparer
Use Only**

Print/Type preparer's name

STEVE LAWRENCE

Preparer's signature

Date

1/29/2025

Check if self-employed PTIN P01255335

Firm's EIN ► 13-5381590

Phone no. 410-997-0335

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054

**Report of Organizational Actions
 Affecting Basis of Securities**

► See separate instructions.

Part I Reporting Issuer

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| Pebblebrook Hotel Trust Inc | | 27-1055421 | |
| 3 Name of contact for additional information | 4 Telephone No. of contact | 5 Email address of contact | |
| ANDREW DITTAMO | 240-507-1300 | INFO@PEBBLEBROOKHOTELS.COM | |
| 6 Number and street (or P.O. box if mail is not delivered to street address) of contact | | 7 City, town, or post office, state, and ZIP code of contact | |
| 4747 BETHESDA AVENUE, SUITE 1100 | | BETHESDA, MD 20814 | |
| 8 Date of action | 9 Classification and description | | |
| 04/15/2024, 07/15/2024, 10/15/2024 | PREFERRED G | | |
| 10 CUSIP number | 11 Serial number(s) | 12 Ticker symbol | 13 Account number(s) |
| 70509V100 | N/A | PEB PR G | N/A |

Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.

14 Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ► PEBBLEBROOK HOTEL TRUST MADE CASH DISTRIBUTIONS ON APRIL 15, 2024, JULY 15, 2024 AND OCTOBER 15, 2024 TO EACH OF IT'S PREFERRED G SHAREHOLDERS. A PORTION OF EACH DISTRIBUTION REPRESENTED A NON TAXABLE DIVIDEND DISTIBUTION.

15 Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ► PREFERRED G SHAREHOLDERS WERE PAID THREE DISTRIBUTIONS. A PORTION OF EACH DISTRIBUTION REPRESENTED A RETURN OF CAPITAL WHICH REDUCED THE BASIS OF THE PREFERRED G SHARES. THE PERCENTAGE OF NON-TAXABLE DISTRIBUTION (RETURN OF CAPITAL) AND REDUCTION IN SHAREHOLDERS BASIS IS AS FOLLOWS:
 APRIL 15, 2024: 18.13%. THE BASIS OF EACH SHAREHOLDER'S PREFERRED SHARES SHOULD BE REDUCED BY \$0.072251 PER SHARE.
 JULY 15, 2024: 18.13%. THE BASIS OF EACH SHAREHOLDER'S PREFERRED SHARES SHOULD BE REDUCED BY \$0.072251 PER SHARE.
 OCTOBER 15, 2024: 18.13%. THE BASIS OF EACH SHAREHOLDER'S PREFERRED SHARES SHOULD BE REDUCED BY \$0.072251 PER SHARE.

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Part II Organizational Action (continued)

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**Sign
Here**

Signature ►

Date ► 1/29/2025

Title ► EVP AND CFO

| | | | | | | |
|---------------------------------------|---|---------|---|-----------|---|-------------------------|
| Paid Preparer Use Only | Print/Type preparer's name | | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
| | STEVE LAWRENCE | |  | 1/29/2025 | | P01255335 |
| | Firm's name ► | BDO USA | | | | Firm's EIN ► 13-5381590 |
| Firm's address ► | 10960 GRANTCHESTER WAY, SUITE 500, COLUMBIA, MD 21044 | | | | Phone no. 410-997-0335 | |

**Report of Organizational Actions
 Affecting Basis of Securities**

► See separate instructions.

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| ANDREW DITTAMO | 240-507-1300 | INFO@PEBBLEBROOKHOTELS.COM | |
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| 4747 BETHESDA AVENUE, SUITE 1100 | | BETHESDA, MD 20814 | |
| 8 Date of action | 9 Classification and description | | |
| 04/15/2024, 07/15/2024, 10/15/2024 | PREFERRED H | | |
| 10 CUSIP number | 11 Serial number(s) | 12 Ticker symbol | 13 Account number(s) |
| 70509V100 | N/A | PEB PR H | N/A |

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Part II Organizational Action (continued)

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**Sign
Here**

Signature ►

Raymond D. Martz

Date ►

1/29/2025

Print your name ► RAYMOND D. MARTZ

Title ► EVP AND CFO

| | | | | | |
|---------------------------------------|--|--|-----------------------|--|-----------------------|
| Paid Preparer Use Only | Print/Type preparer's name STEVE LAWRENCE | Preparer's signature <i>Steve</i> | Date 1/29/2025 | Check <input type="checkbox"/> if self-employed | PTIN P01255335 |
| | Firm's name ► BDO USA | Firm's EIN ► 13-5381590 | | | |
| | Firm's address ► 10960 GRANTCHESTER WAY, SUITE 500, COLUMBIA, MD 21044 | Phone no. 410-997-0335 | | | |