FORM 4

obligations may continue. See

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Instruc	tion 1(b).			File							mpany Act			934			<u> </u>				
1. Name and Address of Reporting Person* <u>Colony NorthStar, Inc.</u>					2. Issuer Name and Ticker or Trading Symbol Colony Starwood Homes [SFR]									S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner							
						3. Date of Earliest Transaction (Month/Day/Year) 03/07/2017									Officer (give title Other (specify below)						
(Street)	GELES CA		90071 (Zip)		4. If Amendment, Date of Original Filed						d (Month/Da	ear)		6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person							
		Tab	le I - No	on-Deriv	ative	Sec	curitie	s Ac	quired	l, Dis	sposed o	of, o	r Bei	nefici	ally	Owne	ed				
Date			2. Transac Date (Month/Da		Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			l (A) or . 3, 4 an	nd 5) Securit Benefic		ies ially Following	Forr (D)	m: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										v	Amount		(A) or (D) Prid			Transa (Instr. 3	ction(s)			(5 4)	
Common Shares, par value \$0.01 per share 03/07			03/07/	2017	2017			S ⁽¹⁾		7,583,84	40 D \$		\$32	2.5	7,535,967		I		By controlled entity ⁽²⁾		
		Та	able II -								osed of, convertib					wned					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		on Date,	4. Transaction Code (Instr. 8)				6. Date Expirati (Month/	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		f s g	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Titl	or Nu of	umber							
1. Name and Address of Reporting Person* <u>Colony NorthStar, Inc.</u>							,	,	,				7			·					
(Last) 515 SOU 44TH FL		(First) ER STREET	(Mi	ddle)																	

Colony NorthS	. •								
(Last)	(First)	(Middle)							
515 SOUTH FLOWER STREET									
44TH FLOOR									
(Street)									
LOS ANGELES	CA	90071							
(City)	(State)	(Zip)							
Name and Address of Reporting Person* CFI CSFR Investor, LLC									
(Last)	(First)	(Middle)							
515 S. FLOWER STREET, 44TH FLOOR									
(Street)									
LOS ANGELES	CA	90071							
(City)	(State)	(Zip)							

Explanation of Responses:

1. On March 1, 2017, CFI CSFR Investor, LLC entered into an underwriting agreement (the "Underwriting Agreement") with the Issuer, Colony Starwood Homes Partnership, L.P., the underwriters party thereto (the "Underwriters") and the selling shareholders party thereto. Pursuant to the Underwriting Agreement, the Issuer agreed to sell 9,600,000 of the Issuer's common shares ("Shares") and the selling shareholders party thereto agreed to sell 10,476,891 Shares in an underwritten offering, of which CFI CSFR Investor, LLC agreed to sell 6,591,238 Shares (the "Offering"). All material contingencies set forth in the Underwriting Agreement were satisfied and the Offering closed on March 7, 2017. In addition, the Underwriters exercised an option to purchase additional Shares, and on March 7, 2017, pursuant to such option exercise the Underwriters purchased 992,602 Shares from CFI CSFR Investor, LLC.

Remarks:

/s/ Darren J. Tangen, authorized signatory

/s/ Darren J. Tangen,

authorized signatory, CFI 03/07/2017

03/07/2017

CSFR Investor, LLC

** Signature of Reporting Person Date

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

- * 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.

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 Number.