FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235- | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| | | | | | OI S | Secui | JII 30(II) | or the n | ivesinei | il Coi | прапу Аст | 01 19 | 740 | | | | | | | |
|---|---|--------------|--|-------------------|--|---|------------|--------------------------------------|---|---|---------------------|---|---------------------------|---|--|--|--|---|------------------------|---------------------------------------|
| 1. Name and Address of Reporting Person* HATKOFF CRAIG M | | | | | 2. Issuer Name and Ticker or Trading Symbol Colony Capital, Inc. [CLNY] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| HAIK | JFF CRA | <u>IIG M</u> | | | | | J | | | | - , | | | | X | Direc | ctor | | 10% C | wner |
| (Last) | (Fi | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/21/2019 | | | | | | | | | Officer (give title below) | | | | Other (specify below) | |
| | | ITAL, INC., | | | | | | | | | | | | | | | | | | |
| 515 S. FLOWER ST., 44TH FLOOR | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) | | | | | | | | | | | | | | | X | Form | n filed by One | e Reporti | na Pers | on |
| LOS ANGELES CA 90071 | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Nor | n-Deriv | ative | Se | curitie | s Acc | uired, | Dis | posed o | of, o | r Ben | efici | ally (| Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/E | | | | h/Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | rities Acquired (A) ad Of (D) (Instr. 3, | | | 4 and Secu Bene Own | | cially I Following | 6. Owne Form: D (D) or In (I) (Instr. | irect direct | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | 、 l | Transa | eported ransaction(s) nstr. 3 and 4) | | | (Instr. 4) |
| Class A Common Stock | | | | 06/21/2019 | | | | A ⁽¹⁾ | | 6,345 | 5 | A | \$0. | .00 | 38,218 | | D | | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | | ned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deem Execution if any (Month/Da | Date, Transaction | | | | | 6. Date Exercisable an Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | | | 9. Number o derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownershi Form: Direct (D) or Indirect (I) (Instr. 4 | n: ct (D) direct | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | | Date Exercisa | | Expiration | Amou or Numb of | | nber | er | | | | | |

Explanation of Responses:

1. election to the board of directors on February 11, 2019 to May 10, 2019 (the "Service Period"), and are immediately vested. The amount of restricted shares was determined by dividing the fixed grant value of \$38,575 (reflecting a pro-rated amount for the Service Period) by the closing price of the Issuer's common stock on the New York Stock Exchange on February 12, 2019.

Remarks:

/s/ Jenny B. Neslin, as Attorney-in-fact 06/25/2019

** 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.