FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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	OMB APPROVAL										
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l	OMB Number:	3235-0287									
l	Estimated average burden										
l	hours per response	: 0.5									

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* REISS DALE ANNE						2. Issuer Name and Ticker or Trading Symbol DigitalBridge Group, Inc. [DBRG] 3. Date of Earliest Transaction (Month/Day/Year)								(Che	eck all app	ationship of Reporting the All applicable) Director Officer (give title		son(s) to I 10% Ov	wner		
(Last)	.ast) (First) (Middle)					05/15/2023									belov			below)	specify		
C/O DIGITALBRIDGE GROUP, INC.,						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
750 PARK OF COMMERCE DRIVE, SUITE 210													1 '	X Form filed by One Reporting Person							
(Street) BOCA RATON FL 33487															Form filed by More than One Reporting Person						
					Rule	Rule 10b5-1(c) Transaction Indication															
(City)	(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Table	I - Noı	n-Deriva	tive S	ecui	rities	Acq	uired, I	Disp	osed of	, or	Ben	eficia	lly Owr	ned					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execu y/Year) if any		Deemed cution Date, y nth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securit Disposed and 5)						5. Amo Securi Benefi Owned Follow	ties cially l ing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		A) or O)	Price		ted action(s) 3 and 4)					
Class A Common Stock 05/15/2						2023			A ⁽¹⁾		16,011		Α	\$ <mark>0</mark>	56,107			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		Secu Acqu (A) o Disp of (D	vative irities uired or osed) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		S S	Price of Operivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y D	0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership t (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nun of	ount nber res							

Explanation of Responses:

1. Represents the receipt of restricted Class A common stock granted by the Issuer to the reporting person in accordance with the Issuer's non-executive compensation policy in connection with the reporting person's recent re-election to the Issuer's board of directors. The restricted shares are scheduled to vest on May 15, 2024. The number of restricted shares was determined by dividing the fixed grant value of \$175,000 by the closing price of the Issuer's common stock on the New York Stock Exchange on the business day prior to the grant date.

Remarks:

/s/ Blake Clardy, as Attorney-in-fact

** Signature of Reporting Person Date

05/17/2023

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.