SEC Form 4	
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## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL

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

Check this box i to Section 16. F obligations may Instruction 1(b).	continue. See		oursua		of the Securiti	NEFICIAL OWN ies Exchange Act of 1934 npany Act of 1940		HIP	Estima	Number: ated average bur per response:	3235-0287 den 0.5	
1. Name and Address of Reporting Person*     TYRRELL NATHAN S     (Last)   (First)   (Middle)     4747 BETHESDA AVENUE   SUITE 1300				uer Name <b>and</b> Tick ST HOTELS		Symbol <u>RTS, INC.</u> [ HST		ationship of Re all applicable Director Officer (giv below)	e)	ng Person(s) to 10% ( Other below	Owner (specify	
					e of Earliest Transa 4/2022	action (Month	/Day/Year)		Exec.	. VP, 1	Investments	
				4. If A	mendment, Date of	f Original Filed	d (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) BETHESDA	MD	20814						x			e Reporting Per re than One Re	
(City)	(State)	(Zip)										
	Tal	ole I - No	n-Derivat	ive S	ecurities Acq	uired, Dis	posed of, or Benef	ficially	Owned			
1. Title of Security (Instr. 3) Date (Month/Day					2A. Deemed Execution Date,	3. Transaction	4. Securities Acquired (A Disposed Of (D) (Instr. 3,		5. Amount of Securities Beneficially	f	6. Ownership Form: Direct	7. Nature of Indirect

	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (Instr.						(D) or Indirect	of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	02/04/2022		F		8,927	D	\$17.46	316,727	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

## By: /s/ William K. Kelso,

Attorney-in-Fact For: Nathan 02/07/2022 S. Tyrrell

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.