Xenia Hotels & Resorts, Inc.

Form 4

March 14, 2017

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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Expires:

January 31, 2005

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OMB APPROVAL

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * BLOOM BARRY A N				Issuer Name a ibol	nd Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer			
			Xei	nia Hotels &	Resorts, Inc. [XHR]	(Check all applicable)			
	(Last)	(First) (Middle) 3. D	ate of Earliest	Transaction				
			(Mo	nth/Day/Year)		Director	10%	Owner	
C/O XENIA HOTELS & RESORTS,				13/2017		_X_ Officer (give		er (specify	
	INC., 200 S	. ORANGE AVI	ENUE,			below) below) See Remarks			
	SUITE 2700)					ice Remarks		
(Street)				Amendment,	Date Original	6. Individual or Joint/Group Filing(Check			
				d(Month/Day/Y	ear)	Applicable Line)			
						X Form filed by One Reporting Person Form filed by More than One Reporting			
	ORLANDO	, FL 32801				Person	hore man One Re	porting	
	(City)	(State)	(Zip)	Table I - Non	-Derivative Securities Acq	quired, Disposed of	f, or Beneficial	ly Owned	
	1.Title of	2. Transaction Date	e 2A. Deemed	3.	4. Securities Acquired	5. Amount of	6.	7. Nature	
	Security	(Month/Day/Year)	Execution Date	e, if Transac	tion(A) or Disposed of (D)	Securities	Ownership	Indirect	
	(Instr. 3)		anv	Code	(Instr. 3, 4 and 5)	Beneficially	Form: Direct	Beneficial	

1.Title of	2. Transaction Date		3. 4. Securities Acquired Transaction(A) or Disposed of (D)				5. Amount of	6.	7. Nature of
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any	Code	` ' '			Securities Beneficially	Ownership Form: Direct	Indirect Beneficial
		(Month/Day/Year)	(Instr. 8)			Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)	
				(A)		Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
			Code V	Amount	(D)	Price	(Ilisti. 5 and 4)		
Common Stock	03/13/2017		M	33,690	A	<u>(1)</u>	60,947	D	
Common Stock	03/13/2017		F	14,133	D	\$ 16.51	46,814	D	

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivativ Security (Instr. 3)		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of ionDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Share Units	\$ 0 (1)	03/13/2017		M		33,690	03/12/2017	03/12/2017	Common Stock	33,690

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

BLOOM BARRY A N C/O XENIA HOTELS & RESORTS, INC. 200 S. ORANGE AVENUE, SUITE 2700 ORLANDO, FL 32801

See Remarks

Signatures

/s/ Marcel Verbaas as Attorney-in-Fact

03/14/2017

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).

Each share unit represents the contingent right to receive one share of Common Stock. This transaction represents the settlement in shares of Common Stock of vested annual share units issued under the Xenia Hotels & Resorts, Inc. 2014 Share Unit Plan (the "2014 Share Unit Plan").

Remarks:

Executive Vice President and Chief Operating Officer

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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