FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | |
|--------------------------|-----------|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | |
| 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).

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

| 1. Name and Address of Reporting Person * CHURCHILL BRUCE | | | | 2. Issuer Name and Ticker or Trading Symbol WYNDHAM HOTELS & RESORTS, INC. [WH] | | | | | | | | | all applicabl | 10% Ow | | | |
|--|--------------|-------|---------------------------|--|---|--|------------------|------|--------------------|--|--------------------|---|--|---|---|---------------------------------------|---|
| (Last) (First) (M WYNDHAM HOTELS & RESORTS, INC | , , , | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/01/2023 | | | | | | | | Officer (g below) | give title | | Other (s below) | specify |
| 22 SYLVAN WAY | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | lividual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person | | | | |
| (Street) PARSIPPANY NJ 07 | 7054 | | | | | | | | | | | | Form filed | d by More | than O | ne Reportin | g Person |
| (City) (State) (Zi | ip) | | | | | | | | | | | | | | | | |
| Та | able I - Non | -Deri | ivative | e Se | curitie | s Acqı | uired, l | Disp | osed of, | or E | Benefic | cially Ow | ned | | | | |
| Date | | | Date Month/Day/Year) i | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 a | | | 5. Amount Securities Beneficially Following I | y Owned Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | Code | v | Amount | | (A) or (D) | Price | (Instr. 3 and 4) | | | | (111541.4) |
| Common Stock 03/0 | | | 01/2023 | | | | A | | 1,617 | (1) | A | \$ 0 | 4,060(2) | | D | | |
| Common Stock | | | | | | | | | | | | | 17,947(3) | | D | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| Title of rivative Conversion or Exercise Price of Derivative Security 2. | Code (Instr. | | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable Expiration Date (Month/Day/Year) | | te | Securities Underl | | derlying curity | 8. Price of Derivative Security (Instr. 5) | e derivative | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Ownership Form: Direct (D) | Beneficial Ownership (Instr. 4) | |
| Explanation of Responses: | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | | Amount or Number of Shares | | (Instr. 4) | on(s) | | |

1. Restricted stock units granted on March 1, 2023 under the Issuer's 2018 Equity and Incentive Plan. The units vest in four equal installments on each of the first four anniversaries of March 1, 2023, subject to the reporting person's continuous service as a Director. The reporting person will receive one share of common stock for each vested restricted stock unit.

- 2. Represents restricted stock units.
- 3. Represents deferred stock units.

/s/ Paul F. Cash as Attorney-in-03/03/2023 Fact for Bruce B. Churchill

** 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.