## FORM 4

## **UNITED ST**

Washington, D.C. 20549

Α	TES	SEC	URIT	IES	AND	EXC	HANGE	COMM	MISSIC	N
~	(IE2	SEC	UKII	IEO	AND	EXC	TANGE	COMIN	119910	1

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burde	en							
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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

## 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

IIISIIUCI																				
1. Name and Address of Reporting Person*  BAGLIVO MARY					2. Issuer Name and Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [HST]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
												1	1	Director			10% Owi	ner		
(Last) (First) (Middle) 4747 BETHESDA AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 10/15/2024								Officer (g below)	give title		Other (sp below)	pecify		
SUITE 1300					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)													1	<u>·</u>						
BETHESDA MD 20814			20814										Form filed by More than One Reporting Person							
(City)	(S	State)	(Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Trans Date (Month/l					saction 2A. Deemed Execution Date if any (Month/Day/Yea		Date,	Code (Instr.						Form ly (D) or		: Direct I r Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership			
									v	Amount	(A) or (D)		•	Transactio (Instr. 3 an	action(s)			Instr. 4)		
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. Transaction Code (Instr. 8)		5. Number of Derivative 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 Securities Underlyin Derivative Security (Instr. 3 and 4)		lying Derivative		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amount Number Shares			(Instr. 4)					
Deferred Stock Units Div. Equiv. Rights	(1)	10/15/2024		A		763.9654		(2)		(2)	Common Stock	763.96	54	\$0.0	9,350.38	882	D			

## **Explanation of Responses:**

- 1. Each dividend equivalent right represents the right to receive one share of common stock of the Issuer.
- 2. The dividend equivalent rights accrued on deferred stock units held by the reporting person and will be settled in shares of the Issuer's common stock on a date selected by the reporting person pursuant to the Issuer's Non-Employee Directors' Deferred Stock Compensation Plan (the "Plan").

By: /s/ William K. Kelso,

Attorney-in-Fact For: Mary L. 10/16/2024

**Baglivo** 

\*\* 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.