FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, I	D.C. 20549	
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Check this box if no longer subject	STATE
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(h)	

## MENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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*  MACNAMARA BRIAN G						2. Issuer Name and Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [ HST ]									5. Relationship (Check all app Direct X Office below		licable) tor er (give title	ng Per	10% Ov Other (s below)	wner
(Last) (First) (Middle) 4747 BETHESDA AVENUE SUITE 1300						3. Date of Earliest Transaction (Month/Day/Year) 11/11/2020											SVP, C	ontro	,	
(Street) BETHESDA MD 20814  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual Line)  X										ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				2. Transaction Date (Month/Day/Ye	Executio		on Date, T		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an				Benefi		ties cially I Following	Forn (D) o Indir	n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code V		Ar	mount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(111341. 4)
Common Stock				11/11/202	0				S		1	10,501	D	\$12.781	817 <sup>(1)</sup> 65,0		55,013.2131		D	
Common Stock				11/11/202	20				S			7,026	D	\$12.966	65 <sup>(2)</sup>	57,987.2131			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)	Exe if ar	Deemed cution Date, ıy nth/Day/Year)		saction (Instr.	5. Nu of Deriv Secu Acqu (A) o Dispo of (D) (Instr and 5	vative irities iired r osed ) r. 3, 4	e (M	piratio	ay/Year) Securitie Underlyi Derivativ Security 3 and 4)		unt of crities erlying vative crity (Instr. d 4)	Der Sec (Ins	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	· V	(D)	Da Ex	te ercisal	ole	Expiration Date	1 Title	Amount or Number of Shares							

## **Explanation of Responses:**

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$12.78 to \$12.795. The reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$12.96 to \$12.9702. The reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

By: William K. Kelso For: Brian G. Macnamara

11/12/2020

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.