С

## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to<br>Section 16. Form 4 or Form 5<br>obligations may continue. See<br>Instruction 1(b). |
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|                                                                                                                              |

## 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

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

| 1. Name and Address of Reporting Person*<br>LENTZ MICHAEL E |         |          | 2. Issuer Name <b>and</b> Ticker or Trading Symbol<br>HOST HOTELS & RESORTS, INC. [HST] |                  | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)<br>Director 10% Owner |                       |  |  |  |
|-------------------------------------------------------------|---------|----------|-----------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------------|-----------------------|--|--|--|
|                                                             |         | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year)                                        | - x              | Officer (give title below)                                                                       | Other (specify below) |  |  |  |
|                                                             |         |          | 02/10/2020                                                                              |                  | Executive Vice President                                                                         |                       |  |  |  |
| (Street)                                                    |         |          | 4. If Amendment, Date of Original Filed (Month/Day/Year)                                | 6. Indi<br>Line) | vidual or Joint/Group Fili                                                                       | ng (Check Applicable  |  |  |  |
| BETHESDA                                                    | MD      | 20814    |                                                                                         | X                | Form filed by One Re                                                                             | porting Person        |  |  |  |
| ,                                                           |         |          |                                                                                         |                  | Form filed by More th<br>Person                                                                  | an One Reporting      |  |  |  |
| (City)                                                      | (State) | (Zip)    |                                                                                         |                  |                                                                                                  |                       |  |  |  |

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 3.<br>Transa<br>Code (<br>8) |   |        |               |         | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|---------------------------------|--------------------------------------------|-------------------------------------------------------------|------------------------------|---|--------|---------------|---------|---------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|
|                                 |                                            |                                                             | Code                         | v | Amount | (A) or<br>(D) | Price   | Transaction(s)<br>(Instr. 3 and 4)                                        |                                                                   | (1130.4)                                                          |
| Common Stock                    | 02/10/2020                                 |                                                             | F                            |   | 3,101  | D             | \$16.69 | 40,608.1449                                                               | D                                                                 |                                                                   |

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

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transa<br>Code (<br>8) |   | of  |     | 6. Date Exerc<br>Expiration Da<br>(Month/Day/\ | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr. 3<br>and 4) |       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|-----------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------|------------------------------|---|-----|-----|------------------------------------------------|-----------------------------------------------------------------------------------------------------|-------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|--|
|                                                     |                                                                       |                                            |                                                             | Code                         | v | (A) | (D) | Date<br>Exercisable                            | Expiration<br>Date                                                                                  | Title | Amount<br>or<br>Number<br>of<br>Shares              |                                                                                                                            |                                                                          |                                                                    |  |

Explanation of Responses:

#### <u>By: William K. Kelso For:</u> <u>Michael E. Lentz</u>

02/12/2020

\*\* 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.