FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

|                                                                                                                                              | d Address of                                                          |                                            | 2. Issuer Name and Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [ HST ] |          |       |                                                          |                                                             |                                 |                                                                                         |         |                    | all app                                                                                           | olicable)<br>ctor            | g Person(s) to Issuer  10% Owner Other (specify |                                                                                                                                   |                                                                                                                           |                                                                   |                                                                    |
|----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------------------------|----------|-------|----------------------------------------------------------|-------------------------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------|---------|--------------------|---------------------------------------------------------------------------------------------------|------------------------------|-------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------|
| (Last) (First) (Middle) 6903 ROCKLEDGE DRIVE SUITE 1500                                                                                      |                                                                       |                                            |                                                                                 |          |       |                                                          | 3. Date of Earliest Transaction (Month/Day/Year) 03/05/2019 |                                 |                                                                                         |         |                    |                                                                                                   |                              |                                                 | belov                                                                                                                             |                                                                                                                           |                                                                   |                                                                    |
| (Street) BETHESDA MD 20817  (City) (State) (Zip)                                                                                             |                                                                       |                                            |                                                                                 |          |       | 4. If Amendment, Date of Original Filed (Month/Day/Year) |                                                             |                                 |                                                                                         |         |                    |                                                                                                   |                              | 6. Indiv<br>Line)<br>X                          | vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person |                                                                                                                           |                                                                   |                                                                    |
|                                                                                                                                              |                                                                       | Tabl                                       | e I - N                                                                         | on-Deriv | ative | Sec                                                      | uritie                                                      | s Ac                            | quirec                                                                                  | d, Dis  | sposed o           | f, or B                                                                                           | enefici                      | ally                                            | Owne                                                                                                                              | ed                                                                                                                        |                                                                   |                                                                    |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/                                                                             |                                                                       |                                            |                                                                                 |          |       | Execution Date,                                          |                                                             |                                 | 3.<br>Transaction<br>Code (Instr.<br>8)  4. Securities Acquire<br>Disposed Of (D) (Inst |         |                    |                                                                                                   |                              | Securities<br>Beneficially<br>Owned Following   |                                                                                                                                   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)                                                         | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership               |                                                                    |
|                                                                                                                                              |                                                                       |                                            |                                                                                 |          |       | Code                                                     | v                                                           | Amount                          | (A) or<br>(D)                                                                           | Price   |                    | Reported<br>Transaction(s)<br>(Instr. 3 and 4)                                                    |                              |                                                 | (Instr. 4)                                                                                                                        |                                                                                                                           |                                                                   |                                                                    |
| Common                                                                                                                                       | Stock                                                                 | 019                                        |                                                                                 |          |       | S                                                        |                                                             | 18,360                          | D                                                                                       | \$19.8  | 378 176,61         |                                                                                                   | 76,618                       | 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. Dee<br>Executi<br>if any<br>(Month/                                         |          |       |                                                          |                                                             | ative<br>rities<br>ired<br>osed | 6. Date<br>Expirat<br>(Month                                                            | tion Da |                    | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |                              |                                                 | vative<br>urity<br>r. 5)                                                                                                          | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(:<br>(Instr. 4) | 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>Exercis                                                                         | sable   | Expiration<br>Date | Title                                                                                             | or<br>Number<br>of<br>Shares |                                                 |                                                                                                                                   |                                                                                                                           |                                                                   |                                                                    |

**Explanation of Responses:** 

By: Elizabeth A. Abdoo For: Michael D. Bluhm

03/07/2019

\*\* 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.