FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL						
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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* GHOSH SOURAV	2. Date of Event Requiring Statem (Month/Day/Year) 06/14/2019	nent T	3. Issuer Name and Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [HST]					
(Last) (First) (Middle) 17700 CRICKET HILL DRIVE	00/14/2015		Relationship of Reporting Perso Check all applicable) Director Officer (give title X	10% Owner Other (specify		5. If Amendment, Date of Original Filed (Month/Day/Year) 06/24/2019		
(Street) GERMANTOWN MD 20874 (City) (State) (Zip)	_ _		below) A SVP, Business Intel	below)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
	Table I - Non-	-Derivativ	ve Securities Beneficially	y Owned				
1. Title of Security (Instr. 4)						4. Nature of Indirect Beneficial Ownership (Instr. 5)		
1. Title of Security (Instr. 4)			eneficially Owned (Instr. 4)	Form: Direct (ct (D) (Ir		Beneficial Ownership	
1. Title of Security (Instr. 4) Common Stock			eneficially Owned (Instr. 4)	Form: Direct (ct (D) (Ir		Beneficial Ownership	
Common Stock		erivative	eneficially Owned (Instr. 4)	Form: Direct or Indirect ((Instr. 5)	et (D) (Ir		Beneficial Ownership	
Common Stock		erivative s, warran	19,786 ⁽¹⁾ Securities Beneficially (Form: Direct or Indirect ((Instr. 5) D Dwned securities ties	et (D) (Ir	5. Ownership	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Explanation of Responses:

1. Includes shares owned as well as restricted stock units which vest in three equal annual installments beginning on the first anniversary of the grant and will be settled in shares of Issuer's common stock.

By: Elizabeth A. Abdoo For: Sourav Ghosh 06/26/2019

** Signature of Reporting Person Date

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

- * If the form is filed by more than one reporting person, see Instruction 5 (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.