FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHAN	<b>GES IN BEN</b>	<b>IEFICIAL O</b>	WNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burde	en
l	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

1. Name and Address of Reporting Person*  HAMILTON JOANNE G.					2. Issuer Name and Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [ HST ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify					
(Last) (First) (Middle) 6903 ROCKLEDGE DRIVE SUITE 1500						3. Date of Earliest Transaction (Month/Day/Year) 02/08/2018									X belo		an R	below)	эрсспу	
(Street) BETHES	Street) BETHESDA MD 20817					4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(SI		(Zip)	n-Deriv	ative				cauired	——	nosed (	of o	Rer	neficia	Ily Own	ed				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					action	ction 2A. Deemed Execution Date,		3. Transa	3. 4. Securiti Disposed Code (Instr. 5)			cquire	d (A) or	5. An Secu Bene	5. Amount of Securities Beneficially Owned Following		m: Direct or Indirect	7. Nature of Indirect Beneficial Ownership		
						(,			Code	v	Amount	amount (A) or Pri		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 02/08/3					3/2018	2018		A <sup>(1)</sup>		22,41	2,419 A S		\$18.	75	65,454		D			
Common Stock 02/08/				3/2018	2018		F		10,31	10,311 D		\$18.	75	55,143		D				
Common Stock 02/08/2			3/2018	2018		A <sup>(2)</sup>		11,760 A S		\$18.	75	66,903		D						
		T	able II -						quired, C s, optio						y Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year)		3A. Deemo Execution if any	A. Deemed xecution Date,		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		Security	8. Price of Derivative Security (Instr. 5)		e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares						
Non- Qualified Stock Option (right to buy)	\$0.0								01/22/201	14 0	01/22/2024	Comi		7,249		7,249	)	D		
Non- Qualified Stock Option (right to	\$0.0								12/31/201	15 0	01/15/2025	Comi		6,551		6,551		D		

## **Explanation of Responses:**

- 1. On February 13, 2017, the reporting person was granted an award of restricted stock units, which vest in the form of common stock based upon the Issuer's (i) performance against certain strategic objective goals and (ii) total shareholder return (TSR) as compared to the Relative Lodging TSR, Relative NAREIT TSR, and Relative S&P 500 TSR. On February 8, 2018, the Compensation Committee of the Issuer's Board of Directors determined that a portion of the performance goals had been met, resulting in the vesting of these shares.
- 2. These shares represent restricted stock units which vest in three equal annual installments beginning on the first anniversary of the grant date and will be settled in shares of the Issuer's common stock.

By: Elizabeth A. Abdoo For: Joanne G. Hamilton

02/12/2018

\*\* 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.