FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB ADDDOMAL
OMB APPROVAL

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

## 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

1. Name and Address of Reporting Person* Stein A William						2. Issuer Name <b>and</b> Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [ HST ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
OTHER A WILLIAM													Director			10% Ow	ner	
													Officer (g	Officer (give title		Other (specify		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)										below)		
6903 ROCKLEDGE DRIVE						07/15/2019												
SUITE 1500																		
(0)					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) BETHESDA MD 20817				- [	07/17/2019							X	X Form filed by One Reporting Person					
DETHEODA MD 2001/													Form file	ed by More	e than (	One Reporti	ng Person	
(City)	(5	State)	(Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transa Date (Month/D								3. 4. Securities Acquired (A) of Transaction Disposed Of (D) (Instr. 3, 4 and 1)				5. Amount	of			. Nature of		
					ıy/Year)	Execution Date, if any (Month/Day/Year		Code (Instr.			Of (D) (Ins	tr. 3, 4 and 5)	Securities Beneficiall Owned Fo	y (D) or		Indirect E tr. 4) C	ndirect Beneficial Ownership Instr. 4)	
								Code	,	Amount	(A) o	Price	Reported Transactio			"	nstr. 4)	
										(0)			(Instr. 3 and 4)					
			Table II - De										wned					
			(e.	g., pu	ts, ca	ılls, warra	ınts,	options	, с	onvertik	le secu	rities)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)				
Deferred Stock Units Div. Equiv. Rights	(1)	07/15/2019		A		146.1447 <sup>(2)</sup>		(3)		(3)	Common Stock	146.1447	\$0.0	909.1	171	D		

## Explanation of Responses:

- $1. \ Each \ deferred \ stock \ unit \ represents \ the \ right \ to \ receive \ one \ share \ of \ common \ stock \ of \ the \ Issuer.$
- 2. The Form 4 filed on July 17, 2019 overstated the number of Deferred Stock Units Div. Equiv. Rights acquired by the reporting person by an immaterial amount. The transaction is restated on this report.
- 3. The dividend equivalent rights accrued on deferred stock units held by the reporting person and will be settled in shares of the Issuer's common stock on a date selected by the reporting person pursuant to the Issuer's Non-Employee Directors' Deferred Stock Compensation Plan (the "Plan").

By: William K. Kelso For: A.
William Stein

07/22/2019

\*\* 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.