SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Restricted Stock

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
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3,355

21,307

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1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol HOST MARRIOTT CORP/ [HMT]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
LARSON GREGORY J											Director	10% 0	Jwner			
,	LARSON GREGORY J (Last) (First) (Middle) 5903 ROCKLEDGE DRIVE SUITE 1500 Street) BETHESDA MD 20817 (City) (State) (Zip) Table I - Non-Deri . Title of Security (Instr. 3) 2. Trar Date										Officer (give title		(specify			
(Last)	(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)							below)	below	′			
6903 ROCKLEDGE DRIVE				11/29/2005							Sr. Vice Presid	lent & Treasu	rer			
SUITE 1500											Chadicial as Jaint/Oracus Filing (Ohadi Applicable					
					iendment, Date of G	Jriginai	Filea	(Month/Day/Ye		6. Individual or Joint/Group Filing (Check Applicable Line)						
l`´´										X	Form filed by One	e Reporting Pers	on			
BETHESDA	MD	20817									Form filed by Mo	e than One Ren	ortina			
											Person					
(City)	(State)	(Zip)														
(Street) BETHESDA MD 20817 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. O																
		able 1 - 1401	I-Delliva		ecunities Acqu	ineu,	Dish		n Den	encially	Owneu					
Date				2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(
Common Stock			11/29/	2005		М		3,200	A	\$8.24	25,087	D				

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

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)	4. Transa Code (8)		of Deri Seci Acq (A) o Disp of (E	osed)) tr. 3, 4	6. Date Exerc Expiration Da (Month/Day/Y	ate	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 Transaction(s) (Instr. 4)	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				
Non- Qualified Stock Option (right to buy)	\$0	11/29/2005		М			3,200	11/01/2002	11/01/2017	Common Stock	3,200	\$8.24	46,800	D	
Non- Qualified Stock Option (right to buy)	\$0							02/02/1999	02/02/2014	Common Stock	2,500		2,500	D	
Non- Qualified Stock Option (right to buy)	\$0							11/02/1999	11/02/2014	Common Stock	11,250		11,250	D	
Non- Qualified Stock Option (right to buy)	\$0							11/08/2000	11/08/2015	Common Stock	32,500		32,500	D	
Non- Qualified Stock Option (right to buy)	\$0							11/02/2001	11/02/2016	Common Stock	10,000		10,000	D	

Explanation of Responses:

11/30/2005

** 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.