FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO              | OVAL      |  |  |  |  |  |
|------------------------|-----------|--|--|--|--|--|
| OMB Number:            | 3235-0287 |  |  |  |  |  |
| Estimated average burd | en        |  |  |  |  |  |
| 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*  Smith Gordon H                         |   |  |   |             |       | 2. Issuer Name <b>and</b> Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [ HST ] |      |     |                                     |        |                      |   |                 |                      | 5. Relationship of Repo<br>(Check all applicable)<br>X Director  |                  |   | 10% Owner   |                      |  |
|--|---|--|---|-------------|-------|--|------|-----|-------------------------------------|--------|----------------------|---|-----------------|----------------------|--|------------------|---|---|----------------------|--|
| (Last) (First) (Middle) 6903 ROCKLEDGE DRIVE                                     |   |  |   |             |       | 3. Date of Earliest Transaction (Month/Day/Year) 01/15/2014                            |      |     |                                     |        |                      |   |                 |                      | Officer (give title below)   |                  |   | Other (specify below)   |                      |  |
| SUITE 1500  (Street)  BETHESDA MD 20817  |   |  |   |             | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year)                               |      |     |                                     |        |                      |   |                 |                      | 6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting |                  |   |   |                      |  |
| (City)   | (St   | ate) (                                     | Zip)  |             |       | Person   |      |     |                                     |        |                      |   |                 |                      |  | •                |   |   |                      |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |   |  |   |             |       |  |      |     |                                     |        |                      |   |                 |                      |  |                  |   |   |                      |  |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Day                     |   |  |   |             |       | Execution Date   |      |     | Transaction Disposed C              |        |                      | ies Acquired (A) o<br>Of (D) (Instr. 3, 4   |                 |                      | and 5) Secur<br>Benef  |                  | ies<br>cially<br>Following  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |                      | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |
|  |   |  |   |             |       |  |      |     |                                     | v      | Amount               | (   | (A) or<br>(D)   | Price                | Trans  |                  | ction(s)<br>3 and 4)  |   |                      | (111501. 4)  |
| Restricted-Annual Director Stock Award 01/15/2                                   |   |  |   |             |       |  | 2014 |     | J <sup>(1)</sup>                    |        | 145.0653             |   | A               | \$19                 | 0.45   | 21,849.0586      |   | D   |                      |  |
| Common   | Stock   |  |   |             |       |  |      |     |                                     |        |                      | 4,373.1778  |                 | D                    |  |                  |   |   |                      |  |
|  |   | Та   |   |             |       |  |      |     |                                     |        | osed of,<br>onvertib |   |                 |                      |  | ned              |   |   |                      |  |
| 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. Deem<br>Execution<br>if any<br>(Month/D | Date, Trans |       |  | of   |     | 6. Date E<br>Expiration<br>(Month/E | on Dat |                      | and 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) |                 | str. 3               | 8. Price<br>Deriva<br>Securi<br>(Instr. !  | ivative<br>urity | 9. Number or<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) | :<br>t (D)<br>direct | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |   |  |   |             | Code  | v  | (A)  | (D) | Date<br>Exercisa                    |        | Expiration<br>Date   | Title   | or<br>Nur<br>of | ount<br>nber<br>ıres |  |                  |   |   |                      |  |

## **Explanation of Responses:**

1. Pursuant to the Non-Employee Directors' Deferred Stock Compensation Plan, reporting person is required to reinvest cash dividends in shares of additional Host Hotels & Resort's common stock.

By: Elizabeth A. Abdoo For: Gordon H. Smith

01/27/2014

\*\* 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.