FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

or Section 30(h) of the Investment Company Act of 1940

| W | ashing | ton, D.C | C. 2054 | 19 | |
|---|--------|----------|---------|----|--|
| | | | | | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| | OMB APPROVAL | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|
| l | OMB Number: | 3235-0287 | | | | | | | | |
| l | Estimated average burden | | | | | | | | | |
| l | hours per response: | 0.5 | | | | | | | | |

| 1. Name and Address of Reporting Person* GOLDEN TERENCE C | | | | 2. Issuer Name and Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [HST] | | | | | | (Chec | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | | |
|--|---|--|--|--|---|-----------------------|------------------|--------------------|--|--|---|-------------------|---|---|--|----------------------|--|---------------------------------------|
| | | | | | | | | | | | ⊣ ^ | Officer (g | give title | | Other (s | · | | |
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/15/2013 | | | | | | | below) | | | below) | | | |
| 6903 ROCKLEDGE DRIVE | | | | | | | | | | | | | | | | | | |
| SUITE 1500 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) | | | | | | | | | | | | | Line) | Form file | d hy One | Renor | tina Person | |
| BETHESDA MD 20817 | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | state) | (Zip) | | | | | | | | | | | | | | | |
| | | Т | able I - Nor | n-Deriva | tive S | ecuritie | s Acc | quired, | Dis | posed c | of, or B | enef | icially | Owned | | | | |
| Date | | | | 2. Transac Date (Month/Da | Execution Date, | | Code (Instr. | | () or , 4 and 5) | and 5) Securities Beneficially Owned Fol | | Form ly (D) or | | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | Code | v | Amount | Amount (A) or Pr | | Price | Reported Transactio (Instr. 3 an | on(s) | | | (Instr. 4) |
| Restricted-Annual Director Stock Award 04/15, | | | | 04/15/ | /2013 | | J ⁽¹⁾ | | 265.5887 | | A | \$17.19 | 45,920 | .2818 | | D | | |
| Common Stock | | | | | | | | | | | | | | 36,687 | .1778 | | D | |
| | | | Table II - | | | curities Ils, warr | | | | | | | | wned | | | | |
| 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 | r, Transaction Code (Instr. | | Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amor Securities Under Derivative Secur (Instr. 3 and 4) | | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Followin Reported | e es ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | Code | v v | (A) | | Date Exercisabl | | xpiration ate | Title | Nu | nount or mber of ares | | Transaction(s) (Instr. 4) | | | |
| Non- Employee Director Def. Stock | \$0.0 | 04/15/2013 | | J ⁽¹⁾ | | 106.2118 | | 04/15/201 | 3 1 | 2/31/2015 | Commo Stock | 10 | 6.2118 | \$17.19 | 18,364. | 0241 | D | |

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: Terence C. Golden

04/25/2013

** Signature of Reporting Person

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.