FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Silligion, D.C. 20049	1
	1
	1

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average b	urden									

0.5

hours per response:

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*  GOLDEN TERENCE C						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)					
GOLDEN TENENCE C												X	_			10% Ov				
(Last) (First) (Middle) 6903 ROCKLEDGE DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 10/15/2012									Officer ( below)	give title		Other (s below)	pecify	
					L															
SUITE 1500						If Ame	endment, C	Date of	f Original	Filed	(Month/Da		6. Individual or Joint/Group Filing (Check Applicable							
(Street)					_									Line)		ad by One	Dono	rtina Doroor		
BETHES	SDA M	ID	20817											Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(S	tate)	(Zip)		_										. 0.00					
		Та	ble I - No	n-Deri	ivativ	ve Se	ecurities	s Acc	quired,	Dis	posed o	f, or	Ben	eficially	Owned					
1. Title of Security (Instr. 3)  2. Transar Date (Month/Date)					ay/Year) Execution I		cution Date,		Code (Instr.		ies Acc Of (D)	quired (Instr.	(A) or 3, 4 and 5)	5. Amoun Securities Beneficia Owned Fo	s lly ollowing	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										v	Amount		A) or D)	Price	Reported Transacti (Instr. 3 a	on(s)				
Restricted-Annual Director Stock Award 10/15					5/201	/2012		J <sup>(1)</sup>		229.2044		A	\$15.77	7 45,411.1293			D			
Common Stock															36,687	7.1778		D		
			Table II -								osed of, onvertil				Owned					
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	ate, 1	Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	e Own S Forn Dire or li I (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				C	Code	v	(A)		Date Exercisal		Expiration Date	Title	;	Amount or Number of Shares		Transaction(s) (Instr. 4)				
Non- Employee Director Def, Stock	\$0.0	10/15/2012			J <sup>(1)</sup>		91.6613		10/15/20:	12 1	.2/31/2015	Comm		91.6613	\$15.77	18,160.4	1084	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

10/16/2012

\*\* 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.