FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TATEMENT	OF CHANGES	S IN BENEFICIAI	OWNERSHI

l	OMB APPRO	VAL
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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).

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*  MACNAMARA BRIAN G					2. Issuer Name and Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [ HST ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner      Officer (give title Other (specify))							
(Last) (First) (Middle) 6903 ROCKLEDGE DRIVE SUITE 1500				3. Date of Earliest Transaction (Month/Day/Year) 02/06/2014									X Officer (give title Other (specify below) SVP, Controller							
	Street) BETHESDA MD 20817			_   4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(City)	(S	-	(Zip)	n Dori	vative	S00	riti	oc A	oguiro		sposod .	of or E	onof	cially	v Owno					
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day			action	2A. Deemed Execution Date,		Code (Instr.   5)			5. Amount of 4 and Securities Beneficially Owned Following		ınt of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership						
							Code	v	Amount	Amount (A) or (D)		ice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)			
Common	Stock			02/00	5/2014	2014			J <sup>(1)</sup>		11,99	01 A \$		18.33	3 64,820.2131			D		
Common Stock 02/06/2			5/2014	2014		F		5,34	5 D \$1		18.33	3 59,475.2131			D					
Restricted Stock 02/06/2			5/2014	2014		<b>J</b> <sup>(1)</sup>	$\perp$	11,99	1 I	\$	18.33	36	5,837		D					
Restricted Stock 02/06/2				2014		J <sup>(2)</sup>		13,92			18.33		2,914		D					
		Ţ									oosed of converti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea		e	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amo or Num of Sha	ber						
Non- Qualified Stock Option (right to buy)	\$0.0								12/31/20	)12	01/20/2022	Common Stock	3,2	15		3,215		D		
Non- Qualified Stock Option (right to buy)	\$0.0								02/05/20	)13	02/05/2023	Common Stock	5,6	37		5,637		D		
Non- Qualified Stock Option (right to buy)	\$0.0								01/22/20	)14	01/22/2024	Common Stock	5,0	32		5,032		D		

## **Explanation of Responses:**

- 1. This transaction represents the release of restrictions on shares of restricted stock which vests on a periodic basis, and inclusion of such shares into unrestricted common stock.
- 2. Restricted Stock Shares forfeited due to failure to satisfy 2013 performance measures.

By: Elizabeth A. Abdoo For: Brian G. Macnamara

02/10/2014

\*\* 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.