Stein A William Form 4 October 16, 2018

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person *

Stein A William

(Last)

2. Issuer Name and Ticker or Trading

3. Date of Earliest Transaction

Symbol

5. Relationship of Reporting Person(s) to

Issuer

HOST HOTELS & RESORTS, INC.

[HST]

(Middle)

(Check all applicable) X_ Director

Officer (give title below)

10% Owner Other (specify

6903 ROCKLEDGE DRIVE, SUITE 10/15/2018

(First)

1500

Security

(Instr. 3)

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

(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

(Instr. 4)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

BETHESDA, MD 20817

(State) (Zip) (City) 1. Title of 2. Transaction Date 2A. Deemed

3. 4. Securities (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Code

(Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5)

(A)

or

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership

(Instr. 4)

Reported

Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

(Month/Day/Year)

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

1. Title of Transaction Date 3A. Deemed 5. Number of

Derivative (Month/Day/Year) Execution Date, if TransactionDerivative Conversion

6. Date Exercisable and **Expiration Date**

7. Title and Amount Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) Disposed of ((Instr. 3, 4, ar 5)	(D)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	/ (A)	(D)	Date Exercisable	Expiration Date	Title	Amoun Numbe Shares
Deferred Stock Units Div. Equiv. Rights-Lump Sum Vesting	Ш	10/15/2018		A	133.4112		<u>(2)</u>	<u>(2)</u>	Common Stock	133.
Deferred Stock Units-Lump Sum Vesting	<u>(4)</u>						<u>(3)</u>	(3)	Common Stock	12,48

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Stein A William 6903 ROCKLEDGE DRIVE SUITE 1500 BETHESDA, MD 20817	X						

Signatures

By: Elizabeth A. Abdoo For: A. William

Stein 10/16/2018

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Each dividend equivalent right represents the right to receive one share of common stock of the Issuer.
- The dividend equivalent rights accrued on deferred stock units held by the reporting person and will be settled in shares of the Issuer's
- (2) common stock on a date selected by the reporting person pursuant to the Issuer's Non-Employee Directors' Deferred Stock Compensation Plan (the "Plan").
- (3) The deferred stock units are fully vested and will be settled in shares of the Issuer's common stock on a date selected by the reporting person pursuant to the Plan.
- (4) Each deferred stock unit represents the right to receive one share of common stock of the Issuer.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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