HOST HOTELS & RESORTS, INC.

Form 4

March 16, 2017

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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Check this box if no longer subject to Section 16.

Form 4 or Form 5

obligations may continue.

See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * HAMILTON JOANNE G.

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Issuer

Symbol

HOST HOTELS & RESORTS, INC.

(Check all applicable)

[HST]

(Last) (First) (Middle)

(Street)

(State)

3. Date of Earliest Transaction

Director 10% Owner X_ Officer (give title Other (specify

(Month/Day/Year)

6903 ROCKLEDGE DRIVE, SUITE 03/15/2017

below)

EVP, Human Resources

(Zip)

1500

(City)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

BETHESDA, MD 20817

| (City) | (State) | (Zip) Tab | le I - Non- | Derivative | Secui | rities Acquii | red, Disposed of, | or Beneficiall | y Owned |
|--------------------------------------|--------------------------------------|---|--|---|---------|---------------|--|--|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transactic Code (Instr. 8) | 4. Securit or Dispos (Instr. 3, 4 | ed of (| ` ' | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock | 03/15/2017 | | M | 15,254 | A | \$ 18.2492 | 61,358 | D | |
| Common Stock | 03/15/2017 | | S | 15,254 | D | \$ 18.2492 | 46,104 | D | |

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

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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 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) | 4. Transaction Code (Instr. 8) | 5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amou Underlying Secur (Instr. 3 and 4) | |
|---|---|--------------------------------------|---|---|---|--------|--|--------------------|---|------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Am or Nu of S |
| Non-Qualified Stock Option (right to buy) | \$ 0 | 03/15/2017 | | M | | 15,254 | 12/31/2016 | 02/04/2026 | Common Stock | 15 |
| Non-Qualified Stock Option (right to buy) | \$ 0 | | | | | | 12/31/2012 | 01/20/2022 | Common Stock | 3, |
| Non-Qualified Stock Option (right to buy) | \$ 0 | | | | | | 02/05/2013 | 02/05/2023 | Common Stock | 6, |
| Non-Qualified Stock Option (right to buy) | \$ 0 | | | | | | 01/22/2014 | 01/22/2024 | Common Stock | 7, |
| Non-Qualified Stock Option (right to buy) | \$ 0 | | | | | | 12/31/2015 | 01/15/2025 | Common Stock | 6, |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|----------------------|-------|--|--|--|--|
| • | Director | 10% Owner | Officer | Other | | | | |
| HAMILTON JOANNE G. 6903 ROCKLEDGE DRIVE SUITE 1500 BETHESDA, MD 20817 | | | EVP, Human Resources | | | | | |
| Signatures | | | | | | | | |
| By: Elizabeth A. Abdoo For: Jo Hamilton | oanne G. | | 03/16/2017 | | | | | |
| **Signature of Reporting Pers | son | | Date | | | | | |

Reporting Owners 2

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).

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.