Edgar Filing: Smith Gordon H - Form 4

Smith Candon II

Form 4											
October 16, 2018			~~~~					~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		PPROVAL	
	UNITEI) STATES					NGE (COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									Estimated average burden hours per	
Form 5 obligations may continue. See Instruction 1(b). 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											
(Print or Type Respo	nses)										
1. Name and Address of Reporting Person <u>*</u> Smith Gordon H			2. Issuer Name and Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [HST]				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
6903 ROCKLEI	(First)	(Middle) E, SUITE	3. Date of 2 (Month/Da 10/15/20	-	nsaction			X_ Director Officer (give below)		Owner er (specify	
1500											
(Filed(Month/Day/Year) ApplX_				Applicable Line) _X_ Form filed by (_X_ Form filed by One Reporting Person					
BETHESDA, M	D 20817							Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	ly Owned	
	Fransaction D onth/Day/Yea	ar) Execution any	on Date, if		Disposed (Instr. 3, 4	(A) o of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock						(2)		4,373.1778	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)

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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. Transactio 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 Amount of Underlying Securities (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	<u>(1)</u>	10/15/2018		А	653.4435	(2)	(2)	Common Stock	653
Deferred Stock Units-Lump Sum Vesting	<u>(4)</u>					<u>(3)</u>	(3)	Common Stock	53,62

Reporting Owners

Reporting Owner Name / Address	Relationships						
I B	Director	10% Owner	• Officer	Other			
Smith Gordon H 6903 ROCKLEDGE DRIVE SUITE 1500 BETHESDA, MD 20817	х						
Signatures							
By: Elizabeth A. Abdoo For: G Smith		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.