FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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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*  HAMILTON JOANNE G.						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)  Director 10% Owner  Officer (give title Other (specify						
6903 ROCKLEDGE DRIVE SUITE 1500						3. Date of Earliest Transaction (Month/Day/Year) 02/13/2017										EVP, Human Resources					
(Street) BETHESDA MD 20817					_   4.  1	t Ame	endmen	t, Date	of Original	Filed	(Month/D		Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting								
(City) (State)		tate)	(Zip)	-											Perso	า					
		Tab	le I - Nor	n-Deriv	ative	e Se	curiti	es A	cquired,	Dis	osed (	of, or	Bene	ficia	ally	Owned	i				
Date			Date	Transaction ate lonth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Code (Instr. 5		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)		,	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock			02/13	3/2017	3/2017					12,28	6 <sup>(1)</sup> A S		\$0	.0	46	,104		D		
		T							quired, D s, option							wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	Date, Transa Code		ı of E		Expiration	6. Date Exercisab Expiration Date (Month/Day/Year)		of Secu Underly		ying tive Security		Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Own Form ly Direct or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		piration ate	Title	or Nu of	umber							
Non- Qualified Stock Option (right to buy)	\$0.0								12/31/2012	2 01	/20/2022	Comn		,782			3,782		D		
Non- Qualified Stock Option (right to buy)	\$0.0								02/05/2013	3 02	/05/2023	Comn Stoc		,631			6,631		D		
Non- Qualified Stock Option (right to buy)	\$0.0								01/22/2014	<b>4</b> 01	/22/2024	Comn Stoc	/	,249			7,249		D		
Non- Qualified Stock Option (right to buy)	\$0.0								12/31/2015	5 01	/15/2025	Comn		,551			6,551		D		
Non- Qualified Stock Option (right to	\$0.0								12/31/2016	6 02	/04/2026	Comn		5,254	Į.		15,254		D		

## **Explanation of Responses:**

1. These shares represent restricted stock units which vest in three equal annual installments beginning on the first anniversary of the grant date and will be settled in shares of the Issuer's common stock.

By: /s/ Elizabeth A. Abdoo,

Attorney-in-fact For: Joanne G. 02/15/2017 Hamilton

\*\* 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.