Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* ABJI MINAZ						2. Issuer Name and Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [HST]								(Che	5. Relationship of Reporting Person(s) to Issu (Check all applicable) Director 10% Ow. V Officer (give title Other (sp.				vner
(Last) (First) (Middle) 6903 ROCKLEDGE DRIVE SUITE 1500						3. Date of Earliest Transaction (Month/Day/Year) 02/04/2016									X Officer (give title Other (specify below) EVP, Asset Management				
(Street)				_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person				·	
BETHES	BETHESDA MD 20817				-)	Form f	Form filed by More than One Reporting Person				
(City) (State) (Zip)					Derivative Securities Acquired, Disposed of, or Beneficially Owned														
		Tal	ole I - No	1		_			-	Dis									
Date				ansaction nth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)					es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or	Price	Reported Transact (Instr. 3	ion(s)			(Instr. 4)
Common Stock					02/04/2016				J ⁽¹⁾		41,80)7 A		\$14.2	178	3,811		D	
Common Stock				02/04/2016				F		22,44	3 I		\$14.2	156	5,368	D			
Restricted Stock				02/0	02/04/2016				A ⁽²⁾		186,06	61 <i>A</i>		\$14.2	316	5,171		D	
					14/2016				J ⁽¹⁾		41,80			\$14.2	1	274,364		D	
Restricted Stock 02/04/					4/201	L6			J ⁽³⁾		88,30	3 I)	\$14.2	186	186,061		D	
		•	Table II -								osed of, onverti				Owned				
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/Day	Date,	4. Transa Code (8)		of		6. Date Exercisal Expiration Date (Month/Day/Year)		•	of Secu Underly Derivati	. Title and Amount of Securities Inderlying Derivative Security Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	or Nu of	mber					
Incentive Stock Option (right to buy)	\$0.0	02/04/2016			A		56,610		12/31/201	.6 0	02/04/2026	Commo Stock	56	5,610	\$14.2	56,610	0	D	
Non- Qualified Stock Option (right to buy)	\$0.0								01/22/201	.4 (01/22/2024	Commo Stock	35	5,608		35,608		D	
Non- Qualified Stock Option (right to	\$0.0								12/31/201	.5 (01/15/2025	Commo Stock	32	2,177		32,17	7	D	

Explanation of Responses:

- 1. This transaction represents the release of restrictions on shares of restricted stock which vested based on 2015 performance and inclusion of such shares into unrestricted common stock. Shares that did not vest based on performance criteria were forfeited.
- 2. 1 year Performance Grant eligible for release based on satisfaction of performance objectives for 2016.
- 3. Restricted Stock Shares forfeited due to failure to satisfy 2015 performance measures.

By: Elizabeth A. Abdoo For: Minaz B. Abji

02/08/2016

** 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.