FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APF	OMB APPROVAL						
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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* LENTZ MICHAEL E 2. Date of Event Requiring Statement (Month/Day/Year) 03/14/2016				ment	3. Issuer Name and Ticker or Trading Symbol HOST HOTELS & RESORTS, INC. [HST]						
(Last)	(First)	(Middle)			Relationship of Reporting Perso (Check all applicable) Director		5. If Amendment, Date of Original Filed (Month/Day/Year)				
				X Officer (give title below) X	Other (spe below)		6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) BETHESDA	MD	20814			Mng. Dir Global Development / Mng. Dir. - Global Development			X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					. Amount of Securities Beneficially Owned (Instr. 4)			. Nature of Indirect Beneficial Ownership Instr. 5)			
Restricted Stock					44,540	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
Expiration				3. Title and Amount of Securi Underlying Derivative Securit	ity (Instr. 4) Conve		Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiratior Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)			
Non-Qualified	Stock Option	(right to buy)	12/31/2016	03/14/2026	Common Stock	13,980	16.87	D			

Explanation of Responses:

By: Elizabeth A. Abdoo For:

Michael E. Lentz

03/18/2016

** 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 5 (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.