FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | | | |
|--------------|----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | | |
| 1 | | | | | | | | | | |

| | Check this box if no longer subject |
|---|-------------------------------------|
|) | to Section 16. Form 4 or Form 5 |
| J | obligations may continue. See |
| | Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| 1. Name and Address of Reporting Person* Geller John E JR | | | | MA | 2. Issuer Name and Ticker or Trading Symbol MARRIOTT VACATIONS WORLDWIDE Corp [VAC] | | | | | | | | | 5. Relationship of Report (Check all applicable) X Director | | | 10% | Owner | |
|--|---|---|--|---------------------------------------|--|---|--------------|-------------------------------------|---|----------------------|--|---|--------------------------------|--|--|---|--|--|--|
| (Last) 9002 SA | (Fir | 3. Date of Earliest Transaction (Month/Day/Year) 08/07/2023 | | | | | | | | | X | belov | er (give titl v) Preside | belov | (specify) | | | | |
| (Street) ORLANDO FL 32819 | | | | 4. If Ai | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applic Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | | | |
| | | | | | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | | |
| | | Table | - Non-Deriva | tive S | ecuri | ties / | Acq u | ıired, | Di | isposed c | of, or | Benefic | cial | ly Owr | ned | | | | |
| Date | | 2. Transaction Date (Month/Day/Yea | 2A. Deemed Execution Dat if any (Month/Day/Ye | | Date, | 3. Transaction Code (Instr. 8) | | ۱ ۱ | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and | | | | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | Cod | Code V | | Amount | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | | |
| Common | Stock | | 08/07/2023 | 3 | | | P | | | 5,000 | A | \$112.84 | 4 ⁽¹⁾ | 43 | ,323 | | D | | |
| Common | Stock | | | | | | | | | | | | | 33, | ,107 | | I | John E. Geller, Jr. Revocable Trust | |
| Common Stock | | | | | | | | | | | | | 33, | ,107 | | I | Shannon H. Geller Revocable Trust | | |
| Common Stock | | | | | | | | | | | | | 500 | | I | | John E. Geller, Sr. Trust | | |
| | | Tab | le II - Derivati (e.g., pu | | | | | | | posed of | | | | Owne | ed | | | | |
| | ecurity or Exercise (Month/Day/Year) if any | | | | Transaction Number Code (Instr. of | | | 6. Date I Expiration (Month/I | on I | | Amo Secu Undo Deriv Secu | tle and unt of urities erlying vative urity r. 3 and 4) | Se (In | erivative ecurity | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownersh Form: Direct (D) or Indirec (I) (Instr. | t (Instr. 4) | |
| | | | | Code V (A) (D | | | | Date) Exercisab | | Expiration e Date | Amour or Numbe of Title Shares | | | | | | | | |

Explanation of Responses:

1. The price in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$112.52 to \$113.07. The reporting person undertakes to provide to Marriott Vacations Worldwide Corporation, any security holder of Marriott Vacations Worldwide Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within such range.

Remarks:

/s/James H Hunter, IV Attorney-In-Fact

08/08/2023

** Signature of Reporting Person

Date

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

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.

^{*} 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).