FORM 4

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

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

| | | | | | UI V | Secui | 011 30(11) | or the | iiivesiiiie | III CU | IIIpariy Act | 01 194 | , | | | | | | | |
|---|---|--|--|---------|-------|--|------------|--|------------------|----------------------------|----------------------|---|----------------|----------|---------------------------------------|---|---|--------------------------------|---|--|
| 1. Name and Address of Reporting Person* <u>Kane-Hanan Lizabeth</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol MARRIOTT VACATIONS WORLDWIDE Corp [VAC] | | | | | | | | | | ionship of Reporting all applicable) Director Officer (give title | | ng Pers | 10% C | |
| (Last) (First) (Middle) 6649 WESTWOOD BLVD. | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/24/2016 | | | | | | | | | | belov Exec. | , | below) P & Chief Growth & Inv. | | |
| (Street) ORLANDO FL 32821 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | . Individine) | ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - No | n-Deriv | ative | Se | curitie | es Ac | quired | , Dis | posed o | f, or | Ben | eficia | ally C |)wne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | | y/Year) Ex | | 2A. Deemed Execution Date, f any (Month/Day/Year) | | | | ties Acquired (A) o d Of (D) (Instr. 3, 4 | | | and 5) Secu Bene | | cially d Following | Form (D) o | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Code | v | Amount | (A (D |) or) | Price | - 11 | Transaction(s) (Instr. 3 and 4) | | | | (111501.4) |
| Common Stock 03/24/2 | | | | | /2016 | 016 | | | S | | 1,900 | | D | \$65.19 | | 23,330.1 | | | D | |
| Common Stock 03/24/2 | | | | | /2016 | 2016 | | | | | 100 | | D | \$65.195 | | 23,230.1 | | | D | |
| | | Та | | | | | | | | | osed of, onvertib | | | | y Ow | ned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deen Executio if any (Month/D | n Date, | | Transaction Code (Instr. | | n of | | Exerci on Dar Day/Ye | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | nstr. 3 | 8. Prio Deriva Secur (Instr. | vative urity | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | D O (I | .0. Ownership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | or Nu of | mber | | | | | | |

Explanation of Responses:

Remarks:

/s/ Catherine Meeker, 03/28/2016 Attorney-In-Fact

** 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.

(A) (D)

^{*} 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).