FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number	3235-02

OMB Number:	3235-0287							
Estimated average burden								
hours ner resnonse:	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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Cunningham R. Lee					<u>M</u>	2. Issuer Name and Ticker or Trading Symbol MARRIOTT VACATIONS WORLDWIDE Corp [VAC]									Check	all app	licable)	Person(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) 6649 WESTWOOD BLVD.					3. Date of Earliest Transaction (Month/Day/Year) 02/22/2016									X Officer (give title Other (specific below) Exec VP & COO						
(Street) ORLANI (City)			32821 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,		Transaction Disposed Code (Instr. 5)			ities Acquired (A) d Of (D) (Instr. 3, 4			4 and Secur Benef		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(<i>A</i>	A) or D)	Price	Trans		action(s) 3 and 4)		(11150.4)	
Common Stock 02/22/					2/2016	2016			A		6,437		A	\$0.00		35,974.3		D		
Common	Common Stock 02/23/20					2016			F	f 1,758			D	\$55.28		34,216.3		D		
		Та									sed 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. Deem Execution if any (Month/Da	Date,	Date, Transact Code (In:				6. Date E Expiratio (Month/D	n Dat	e Amount of		str. 3	8. Pri Deriv Secu (Instr	rative rity 7. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)			Expiration Date	Title	or	ount mber ares						

Explanation of Responses:

Remarks:

<u>/s/ Catherine Meeker,</u> <u>Attorney-In-Fact</u> <u>02/24/2016</u>

** 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.

 $^{^{\}star}$ 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).