FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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Nashington	DC 2	0549	

OMB APPROVAL													
OMB Number:		3235-0287											
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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative

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

Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person* Gustafson Lori M (Last) (First) (Middle) 7812 PALM PARKWAY			MA	2. Issuer Name and Ticker or Trading Symbol MARRIOTT VACATIONS WORLDWIDE Corp [VAC]							(Chec	k all app Direc	licable)		rson(s) to Issuer 10% Owner Other (specify				
			3. Date of Earliest Transaction (Month/Day/Year) 12/16/2024							below) See Remarks									
(Street) ORLANDO FL 32836 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Line) ✓ Form filed by One Reporting Perform filed by More than One Reperson								orting Pers	on				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				2A. Deemed Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)				a) or 5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
Common Stock 1			12/16/2	/2024				Code F(1)	v	Amount 539	(A) (D)		ice 94.89	Transaction(s) (Instr. 3 and 4)		D		(Instr. 4)	
1. Title of 2.		Tal		Derivati e.g., pu	ve Se		warra		ired, [option	ns, c	osed of, convertib	or Be	nefic	ially (<u> </u>	,	of	10.	11. Natu
Derivative Conversion Date			Execution if any	ion Date, //Day/Year) 4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) or Dispo of (D) (Instr	rative rities ired r osed)	Expiration Da (Month/Day/Yo		rete Amo Secu Undo Deriv Secu		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		curity str. 5)	derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Ownership Form:	of Indire Benefic Owners t (Instr. 4	
									Date		Expiration		Amou or Numb	1					

Explanation of Responses:

 $1. \ Shares \ withheld \ by \ the \ Company \ for \ the \ payment \ of \ tax \ liability.$

Remarks:

Title: Executive Vice President and Chief Membership and Commercial Services Officer

/s/ James H Hunter, IV 12/17/2024 Attorney-In-Fact

** 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.