FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington	DC3	0549			

OMB APP	PROVAL						
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 defense conditions of Rule 10b5-1(c). See Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Millor Drice F			2. Issuer Name and Ticker or Trading Symbol MARRIOTT VACATIONS								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Miller Brian E.			WORLDWIDE Corp [VAC]								v		cer (give title Other (spec						
(Last) (First) (Middle) 7812 PALM PARKWAY			3. Date of Earliest Transaction (Month/Day/Year) 12/16/2024									below) below) President, Vacation Ownership							
(Street) ORLANDO FL 32836			4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indiv Line)	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting									
(City)	(St	ate) (Ž	Zip)										Person						
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	icially	Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)			4 and Securit Benefic Owned		ties Forr cially (D) of I Following (I) (II		Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership						
							Code V Amount		(A) (D)	or Pr	ice		ed ction(s) 3 and 4)			(Instr. 4)			
Common Stock 12/16/			12/16/2	2024			F ⁽¹⁾		1,481	D	\$	94.89	37,319		I	D			
		Tal									osed of, o				Owne	d			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	if any	ution Date, Tran		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price or Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Di or (I)	D. wnership orm: irect (D) r Indirect) (Instr. 4)	11. Natur of Indired Beneficia Ownersh (Instr. 4)		
						v	(A)	(D)	Date		Expiration		Amou or Numb of						

Explanation of Responses:

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

Remarks:

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

12/17/2024

** 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.