| SEC Form 4 | |
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| FORM | 4 |

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAI | |
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| OMB Number: | 3235-0287 | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| 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 |

| | fy the affirmative ons of Rule 10b5- ction 10. | | | | | |
|-----------------------|--|----------|---|------------------------|--|--|
| 1. Name and Addre | ess of Reporting Pers j <u>amin T.</u> | on* | 2. Issuer Name and Ticker or Trading Symbol <u>MARRIOTT INTERNATIONAL INC</u> <u>/MD/</u> [MAR] | (Check | tionship of Reporting Pe all applicable) Director Officer (give title | rson(s) to Issuer 10% Owner Other (specify |
| (Last) 7750 WISCON | (First) SIN AVENUE | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 09/16/2024 | EVP & Chief HR Officer | below) | |
| (Street) BETHESDA | MD | 20814 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | idual or Joint/Group Filir Form filed by One Rep Form filed by More tha | oorting Person |
| (City) | (State) | (Zip) | | | Person | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Disposed Of (D) (Instr. 3, 4 and Code (Instr. 5) | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
|---|--|---|--|---|--------|---|---|---|---|-------------------|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Class A Common - Restricted Stock Units | 09/16/2024 | | F ⁽¹⁾ | | 753 | D | \$233.83 | 13,583 | D | |
| Class A Common Stock | | | | | | | | 12,785.527 | D | |
| Class A Common Stock | | | | | | | | 1,214.185 | Ι | 401(k) account |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | | | • | • | | | | | | | , | | | |
|---|---|--|---|------------------------------|---|--|-----|---|--------------------|--|--|--|--|--|--|
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration Date Amount of Month/Day/Year) Securities Underlying Derivative | | Amount of Security derivative Security Security Security Security Security Security Security (Instr. 5) Beneficial Owned Security (Instr. 5) Secur | | Securities Beneficially Owned Following Reported Transaction(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Shares withheld by the Company to cover taxes associated with vesting RSUs.

Andrew P.C. Wright, Attorney-in-Fact

09/18/2024

** 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.