FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20349

OMB APPROVAL

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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 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person [*] <u>Linnartz Stephanie</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol MARRIOTT INTERNATIONAL INC /MD/ [MAR] | | | | | | | | (Ched | k all app Dired | p of Reportin olicable) ctor er (give title | 1 | , .0% O | |
|--|---|--|--|---------|-------|---|-----|-----|---|----------------------------|--------------------|---|-----------------------------------|---------------------------------------|---|---|---|---|--|
| (Last) (First) (Middle) 10400 FERNWOOD ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/28/2017 | | | | | | | | X | belov | | k | elow) | |
| (Street) BETHESDA MD 20817 (City) (State) (Zip) | | | | | 4. lf | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Ind Line) | Forn Forn | dual or Joint/Group Filing (Check Applicable 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. Transact Date (Month/Day | | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) | | | | | Secur Benef | icially d Following | 6. Owners Form: Dir (D) or Indi (I) (Instr. 4 | ect rect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or P | Price Transaction(s) (Instr. 3 and 4) | | action(s) | | | |
| Class A Common Stock 12/28/2 | | | | | /2017 | 2017 | | G | V | 307 | | \$ | 0.0000 | 27,956 | | D | | | |
| 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. Deen Executio if any (Month/D | n Date, | | ransaction Code (Instr. | | of | | exerci on Dat Day/Ye | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | De Se (In: | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Owner Form: Direct or Indi (I) (Ins | (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | ble | Expiration Date | Title | Amou or Numb of Share | per | | | | | |

Explanation of Responses:

Bancroft S. Gordon, Attorney-

01/03/2018

<u>In-Fact</u>

** 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.