FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| Estimated average burden | | | | | | | |

0.5

hours per response:

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 S | sectio | n 30(n) | of the li | nvestme | nt Coi | mpany Act o | of 1940 | | | | | | | |
|---|--|---------|--------------------------------|---------------|--|---------------------------------|---|-----------|-----------|---|------------------|------------|---|--|---|--|--|-----------------------|-------------|
| 1. Name and Address of Reporting Person* REINEMUND STEVEN | | | | <u>M</u> | 2. Issuer Name and Ticker or Trading Symbol MARRIOTT INTERNATIONAL INC /MD/ [MAR] | | | | | | | | | heck all a | ship of Reportin applicable) rector | g Person(s) to Issuer 10% Owner | | | |
| (Last) (First) (Middle) 10400 FERNWOOD ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/09/2011 | | | | | | | | | | | ficer (give title low) | | Other (specify below) | |
| (Street) BETHES (City) | | | 20817 Zip) | | 4. If | Amer | ndment, | Date o | f Origina | l Filed | i (Month/Da | y/Year) | | 6. Lir | ne) X Fo | l or Joint/Group orm filed by One orm filed by Mo erson | e Reportino | g Pers | on |
| | | Tabl | e I - No | n-Deriva | ative | Sec | curitie | s Acc | quired, | Dis | posed o | f, or I | 3ene | eficia | lly Ow | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | Execution Dat | | Date, | 3. Transaction Code (Instr. 8) | | | | | | Sec Ber Ow | mount of urities leficially ned Following lorted | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | ect irect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or | Price | Tra | nsaction(s) tr. 3 and 4) | | | (111311. 4) |
| Class A Common Stock-Dir. Def. Stock Comp Plan-1 | | | | | 2011 | | A ⁽¹⁾ | | 3,024 | | A | \$0.0000 | | 7,855 | | | | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | Owne | d | | | |
| Title of Derivative Security 1. Title of Conversion or Exercise (Month/Day/Year) 1. Title of Derivative Security 2. Conversion Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 4. Conversion Date (Month/Day/Year) 5. Conversion Date (Month/Day/Year) | | n Date, | Date, Transaction Code (Instr. | | 5. Nu of Deriv Secu Acqu (A) oi Dispo of (D) (Instr and 5 | ative rities ired osed | 6. Date E Expiratio (Month/E | n Dat | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Price (Derivativ Security (Instr. 5) | | Owner Form: Direct or Ind (I) (Ins | (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. Each non-employee director receives an annual director stock award under the 2002 Comprehensive Stock and Cash Incentive Plan. The award is generally the number of shares having an aggregate market value as of the date of grant of approximately the amount of the annual director's retainer fee.

Date Exercisable

Expiration Date

Bancroft S. Gordon, Attorney-**In-Fact**

of Shares

Title

05/10/2011

** 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).

Code

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.

(A) (D)