Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See 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 | | | | | |
| hours per response: | | | | | |

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 [*] Goren Isabella D | | MA | suer Name and Ticl ARRIOTT IN D/ [MAR] | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
|--|----------------------|--|---|--|--|--|--|--|--|---------------|
| (Last) 10400 FERNW | (First) 700D ROAD | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 05/09/2022 | | | | Officer (give title below) | Other below | (specify) |
| (Street) BETHESDA | MD | 20817 | 4. lf | Amendment, Date o | of Original File | d (Month/Day/Year) | 6. Indiv Line) X | ridual or Joint/Grou Form filed by On Form filed by Mo | e Reporting Per | son |
| (City) | (State) | (Zip) | | | | | | Person | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |
| Date | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any | 3. Transaction Code (Instr. | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | 5. Amount of Securities Beneficially | 6. Ownership Form: Direct (D) or Indirect | 7. Nature of Indirect Beneficial | |

| | (Month/Day/Year) | if any (Month/Day/Year) | Code (Instr. 8) | | 5) | | | Beneficially Owned Following Reported | (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
|---|------------------|----------------------------|--------------------|---|----------------------|---------------|----------|---|-----------------------------------|---------------------------------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130. 4) |
| Class A Common Stock-Dir. Def. Stock Comp Plan-1 | 05/09/2022 | | A | | 1,111 ⁽¹⁾ | Α | \$0.0000 | 1,111 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of Derivative 3A. Deemed Execution Date, 6. Date Exercisable and Expiration Date 7. Title and Amount of 8. Price of Derivative 9. Number of derivative 10. Ownership 11. Nature of Indirect 3. Transaction 5. Number Conversion Date Transaction (Month/Day/Year) Derivative Security or Exercise if any (Month/Day/Year) Code (Instr. (Month/Day/Year) Securities Security Securities Form: Beneficial Price of Derivative Securities Acquired Ownership (Instr. 4) (Instr. 3) 8) Underlying (Instr. 5) Beneficially Direct (D) Owned or Indirect Derivative (A) or Disposed of (D) (Instr. 3, 4 and 5) (I) (Instr. 4) Security Security (Instr. 3 and 4) Following Reported Transaction(s) (Instr. 4) Amount or Number Date Exercisable Expiration of Shares v (D) Title Code (A) Date

Explanation of Responses:

1. The shares will vest on a daily pro-rata basis over the twelve (12) month period following the grant and be distributed following termination of service as a Board member.

| Andrew P.C. Wright, | 05/10/2022 |
|---------------------|------------|
| Attorney-in-Fact | 05/10/2022 |

** 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.