## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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Washington.	D.C.	20549

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL						
OMB Number:	3235-0362					
Estimated average burden						
hours per response:	1.0					

Form 3 Holdings Reported.

Form 4	Transactions R	eported.	File	ed pursuant to or Section								1934					
1. Name and Address of Reporting Person <sup>*</sup> MARRIOTT RICHARD E				MARR	2. Issuer Name and Ticker or Trading Symbol  MARRIOTT INTERNATIONAL INC  /MD/ [ MAR ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner  Officer (give title Other (specify below)					
(Last) (First) (Middle) 10400 FERNWOOD ROAD					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2015						ar)						
(Street) BETHES	DA MI	) 2	20817	4. If Amend	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)										F 613	011			
			e I - Non-Deriv				quire						<del>-i</del>		I .		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	te,	3. Transact Code (Ins					) or E	Disposed	5. Amount of Securities Beneficially Owned at end of	es ally	6. Ownership Form: Dire (D) or	ership   II : Direct   E	. Nature of ndirect Seneficial Ownership	
				(		-,		Amoun	t	(A) or (D)	Pri	ice	Issuer's		Indirect (I) (Instr. 4)	ect (I) (	(Instr. 4)
Class A C	lass A Common Stock		12/18/2014			S		65,	156	D	\$77.35		1,119,239				Spouse Trustee <sup>(1)</sup>
Class A C	ommon Sto	ck	12/18/2014			S		26,	063	D		\$77.35	168	,056		I	Trustee 3 <sup>(1)</sup>
Class A C	ommon Sto	ck											15,58	39,631		D	
Class A C	ommon Sto	ck											3,35	6,363		I (	Other <sup>(1)</sup>
Class A C	ommon Sto	ck											1,52	3,132			REM GRAT X
Class A C	ommon Sto	ck											1,12	6,623		I I	REM Rev. Trust U/A 5/5/14
Class A C	ommon Sto	ck											282	,744		I S	Spouse <sup>(1)</sup>
Class A C	ommon Sto	ck									Γ		496	,960		Ι 7	rustee 1 <sup>(1)</sup>
Class A Common Stock												17,000				Trustee .7 <sup>(1)</sup>	
Class A C	ommon Sto	ck											5,12	5,444			Trustee 9 <sup>(1)</sup>
Class A C	ommon Sto	ck											624	,187		I 7	rustee 2 <sup>(1)</sup>
Class A Common Stock												495,559			I 7	rustee 4 <sup>(1)</sup>	
Class A Common Stock											758,940			I 7	Trustee 5 <sup>(1)</sup>		
Class A Common Stock										L		530,915			I 7	Trustee 6 <sup>(1)</sup>	
Class A Common Stock									L		95,207			I 7	Trustee 7 <sup>(1)</sup>		
Class A Common Stock												595	595,999		I 7	Trustee 8 <sup>(1)</sup>	
		Та	ble II - Derivat. e.g., p.	ive Securi uts, calls, v									y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion Date Executio or Exercise (Month/Day/Year) if any (Month/D erivative	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		Am Sec Und Der Sec	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					(A)	(D)	Date Exerc	Expiration cisable Date		n Title		Amount or Number of Shares					

## **Explanation of Responses:**

Bancroft S. Gordon, Attorney- 01/30/2015

In-Fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.