## 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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	4 Transactions		Filed	d pursuant to S or Section 3								1		-			
1. Name and Address of Reporting Person*  KATZ ROBERT A		2. Issuer Name and Ticker or Trading Symbol VAIL RESORTS INC [ MTN ]						5. Relationship of Reporting Person(s) to (Check all applicable)  X Director 10% 0				Owner					
(Last) (First) (Middle) C/O VAIL RESORTS, INC. 390 INTERLOCKEN CRESCENT				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 07/31/2020							X	belov	,	give title Other below sec.Officer & Chairn		,	
(Street)	IFIELD CO	) {	30021 Zip)	4. If Amend	ment,	Date o	of Orig	ginal File	d (Month/E	ay/Yea	ar)	6. Inc Line) X	Form	i filed by	One Re	ng (Check porting Pe an One R	
		Table	I - Non-Deriva	ative Secu	rities	s Acc	quire	d, Dis	posed o	of, or	Benef	ficial	ly Own	ed			
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any		3. Transaction Code (Instr.		4. Securities Acquired (A) or Disp Of (D) (Instr. 3, 4 and 5)			Securities Beneficially		es ally	6. Ownership Form: Dire				
				(Month/Day/Year)		8)		Amount (A		A) or D)	Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		Indire	(D) or Indirect (I) (Instr. 4)	
Common	Stock		09/30/2019			G		5,0	000	D \$		0	279,2		,295 D		
Common Stock		06/19/2020			G		20,	000	D	\$0		259,295		D			
		Та	ble II - Derivat (e.g., pı	ive Securit uts, calls, v									Owne	d			
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. Transaction Code (Instr. 8)	of Deri Secu Acqu (A) o Disp of (D	osed )) :r. 3, 4	Expi	ration Da hth/Day/Y		Ame Sec Und Deri Sec 3 ar	itle and ount of urities lerlying ivative urity (Ins and 4)	Str.	Price of erivative ecurity estr. 5)	9. Numl derivati Securiti Benefic Owned Followi Reporte Transac (Instr. 4	ive ies cially ng ed ction(s)	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Bene ) Owne

**Explanation of Responses:** 

Remarks:

Emily S. Barbara, Attorneyin-Fact for Robert A. Katz

09/03/2020

\*\* Signature of Reporting Person

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).