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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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	1 Transactions	Reported.	Filed	d pursuant to S or Section 3													
1. Name and Address of Reporting Person* DECKER SUSAN L				2. Issuer Name and Ticker or Trading Symbol VAIL RESORTS INC [MTN]						5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Owner							
(Last) (First) (Middle) C/O VAIL RESORTS			3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 07/31/2021						y/Year)		Office below	Oth belo	er (specify w)				
390 INTERLOCKEN CRESCENT				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) BROOMFIELD CO 80021			30021									X	Form	i filed by C i filed by M on			
(City)	(St	ate) (2	Zip)														
		Table	I - Non-Deriva	ative Secu	ritie	s Acc	uire	d, Dis	posed	of, o	Benefi	cial	ly Own	ed			
''' '''		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5)			A) or Dispo	Securit Benefic		ies Owi		ership : Direct	7. Nature of Indirect Beneficial	
				(Month/Day/Ye	ear)	8)		Amoun	t	(A) or (D)	Price		Issuer's	at end of Fiscal str. 3 and	(D) oi Indire (Instr	ect (I)	Ownership (Instr. 4)
Common Stock		12/24/2020	G			3	370 D \$0		\$0		4,561		D				
		Tal	ble II - Derivat (e.g., p	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 Seco Acq (A) o Disp of (I (Inst	oosed D) tr. 3, 4 5)	Expir (Mon	xpiration Date Month/Day/Year) Amout Securi Under Deriva Securi 3 and		Amoun or Numbe of	D Si (li	Price of erivative ecurity nstr. 5)	ivative derivativ curity Securitie		10. Owners Form: Direct (I or Indir (I) (Instr	Benefic O) Owners	

Explanation of Responses:

Remarks:

Emily S. Barbara, Attorneyin-Fact for Susan L. Decker

** Signature of Reporting Person Date

09/10/2021

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.