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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					Wa	shi	ngto	on,	D.	C.	2054

Washington,	DC	205/10
vvasiiiigioii,	D.C.	20049

OWNERSHIP

ANNUAL STATEMENT	OF (CHANGES	IN BEI	NEFICIAL

OMB APP	ROVAL							
OMB Number:	3235-0362							
Estimated average burden								
hours per response	. 10							

Form 3 Holdings Reported.

Form 4	Transactions	Reported.	Filed	d pursuant to S or Section 3								f 1934						
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 Issuer (Check all applicable)								
												X Direc				6 Owr		
(Last)	3 Statemer	Statement for Issuer's Fiscal Year Ended (Month/Day/Year)							ear)	X Offic below	er (give titl w)	е	Oth belo	er (sp ow)	ecify			
				07/31/202		.0000.	, , , , , ,	a		01101112	- u, ,	Jan, 1	Chief Exec.Officer & Chairman					n
l		N CRESCENT																
				4. If Amend	ment	, Date o	of Orig	ginal File	d (Month	/Day/\	Year)	6.	Individual o	r Joint/Gro	up Fili	ng (Ched	ck App	plicable
(Street)												Lir	Line)					
BROOM	IFIELD CO	8	30021									X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)		Form filed by More Person							iore un	an One i	керы	ung						
(City)	(30	ate) (2	Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea				2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disp Of (D) (Instr. 3, 4 and 5)			r Disposed	5. Amou Securiti Benefic Owned	ies Owr cially For		nership Ind m: Direct Be		Nature of direct eneficial wnership	
				, ,		0)		Amoun	it	(A) or (D) Price		rice	Issuer's			ect (I) (Instr. 4)		
Common	Stock		12/21/2020	G			25,	300	D		\$0	237	237,224		D			
		Tal	ble II - Derivat (e.g., pı	ive Securit uts, calls, v										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 Seci Acq (A) (Disp of (E	wative (Month titles or coosed to); r. 3, 4		ration Da	on Date Apay/Year) S		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)	rivative derivativ curity Securitie		re Owners es Form: ally Direct (or Indir g (I) (Institution(s)		11. Nature of Indirect Beneficial Ownership (Instr. 4)
				or Num Date Expiration of					Number									

Explanation of Responses:

Remarks:

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

** 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.