FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	C. 20549
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STATEMENT	OF CHANGES IN	I BENEFICIAL	OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	: 0.5						

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

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* Vaughn Peter A				2. Issuer Name and Ticker or Trading Symbol VAIL RESORTS INC [MTN]								all appl	tor	ng Per	10% O	wner			
	(Fir	S, INC.	⁄liddle)			te of E 5/202		Trans	action (Month	n/Day/Year)				below	er (give title r)		Other (below)	specify
390 INTERLOCKEN CRESCENT					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) BROOM	FIELD CO	8	0021											X		filed by One filed by Mo in		•	- 1
(City)	(Sta	ate) (Z	Zip)																
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired	, Dis	posed of	, or B	enefic	ially	Own	ed			
Date			2. Transact Date (Month/Day	Execution Date,				es Acquired (A) Of (D) (Instr. 3, 4		4 and Sec Ben Owr		Amount of curities neficially vned Following ported		n: Direct	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) o (D)	r Price		Transa	action(s) 3 and 4)			(Instr. 4)	
Common Stock 06/15/20				:021			S		1,000	D	\$32	1.93	7,025			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		5. Nu of Deriv Secul Acqu (A) oi Dispo of (D) (Instr and 5	rities ired r osed)	Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)				derivative Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

Remarks:

Emily S. Barbara, Attorneyin-Fact for Peter A. Vaughn

06/16/2021

** 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.