FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	OVAL	
OMB Number:	3235-0	287
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nours per response	e	0.5

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person *			2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Post Denny Marie Tr				Travel & Leis	ure C	o. [T	NL]				_X_ Direc		eck all applic	10% Owner		
(Last) (First) (Middle) C/O TRAVEL + LEISURE CO., 6277 SEA HARBOR DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 07/29/2021						Office	r (give title belo	ow)	Other (specify	below)		
(Street)				4. If Amendment, Date 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						
ORLANI	DO, FL 32	821										ou by More than	r one reporting	1 crson		
(City)	(State)	(Zip)	T	able I	- Non	-Deri	ivative S	Securities	Acqu	ired, Disp	osed of, or l	Beneficially	Owned		
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			2A. Deemed Execution Date, i			(A) or Disposed of (Instr. 3, 4 and 5)			of (D)				Ownership of	Beneficial		
			(Month/Day/Year		ode	V	Amour	(A) or (D)	Price	(Instr. 3 a	and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common	Stock		07/29/2021			A		617 ⁽¹	A A	\$ 0	7,923 (2)		D		
Common	Stock										8,374 (3)			D		
Common	Stock										5,418 (4)			D		
Reminder:	Report on a s	separate line for		Derivative Securit	ties Ac	equire	Perso conta the fo	ons whained in orm dis	no responding this for splays a	rm are curre	e not requ ntly valid	OMB con	formation spond unle trol numbe	ess	1474 (9-02)	
			,	e.g., puts, calls, w		ts, opt						0.51.0		2 42	44.37	
Security	2. Conversion or Exercise Price of Derivative Security	3. Transactior Date (Month/Day/Y	Execution Date (Year)	4. Transaction Code (Instr. 8)	5. Numl of Deriv Secur Acqu (A) o Dispo of (D (Instr 4, and	rative rities ired rosed) . 3,	and Expiration Date (Month/Day/Year) Ar Ur Se (Ir 4)		Am Und Sec	urities (Instr. 5) I tr. 3 and		Derivative Securities Beneficiall Owned Following Reported	erivative curities Form of Derivative Security: Dilowing Eported Enasaction(s) Ownership Form of Derivative Security: Direct (D) or Indirect (I)		Ownership of Indir Form of Derivative Security: Direct (D) or Indirect (s) (I)	
				Code V	(A)	(D)	Date Exerc		Expiration Date	n Titl	Amount or Number of Shares	ıber				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Post Denny Marie C/O TRAVEL + LEISURE CO. 6277 SEA HARBOR DRIVE ORLANDO, FL 32821	X					

Signatures

/s/ James Savina as Attorney-in-Fact for Denny Marie Post	08/02/2021
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) Deferred stock units issued for quarterly retainer fees and dividends. Each deferred stock unit entitles the reporting person to receive one share of common stock following the reporting person's retirement or termination of service from the Board of Directors.
- (2) Includes previously reported deferred stock units.
- (3) Previously reported shares of common stock.
- (4) Previously reported restricted stock units.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.