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

(Print or Type Pesno

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

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#### 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 Type Responses)		r									
1. Name and Address of Reporting Po Savina James J	2. Issuer Name ar Travel & Leisur			0.	ool	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) C/O TRAVEL + LEISURE CO HARBOR DRIVE	(Middle) O., 6277 SEA	3. Date of Earliest Transaction (Month/Day/Year) 03/03/2021						X Officer (give title below) Other (specify below)   See Remarks See Remarks See Remarks			
(Street) ORLANDO, FL 32821	4. If Amendment, I	Date Origin	al Fil	led(Month/D	ay/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					
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)		Execution Date, if			*		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership of Indire	7. Nature of Indirect Beneficial	
			Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock	03/03/2021		А		18,644 ( <u>1)</u>	А	\$ 0	74,778 (2)	D		
Common Stock								9,118 (3)	D		

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

Persons who respond to the collection of information

SEC 1474 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)													
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Num	ıber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deri	vative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Secu	rities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				Acq	uired			4)			Following	Direct (D)	
					(A)							1	or Indirect	
					Disp	osed						Transaction(s)	(I)	
					of (I	))						(Instr. 4)	(Instr. 4)	
					(Inst	· · ·								
					4, ar	ıd 5)								
										Amount				
							Dete	E		or				
								Expiration	Title	Number				
							Exercisable	Date		of				
				Code V	(A)	(D)				Shares				

# **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Savina James J C/O TRAVEL + LEISURE CO. 6277 SEA HARBOR DRIVE ORLANDO, FL 32821			See Remarks					

# Signatures

2021

# **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).
- Restricted stock units granted on March 3, 2021 under the Registrant's Equity and Incentive Plan. The units vest in four equal installments on each of the first four (1) anniversaries of March 10, 2021, subject to the reporting person's continued employment with the Registrant. The reporting person will receive one share of common stock for each vested restricted stock unit.
- (2) Includes previously reported restricted stock units.
- (3) Previously reported shares of common stock.

#### **Remarks:**

Executive Vice President, General Counsel & Corporate Secretary

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.