## FORM 4

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

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).

#### 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)		•										_
Name and Address of Reporting Person * HUG MICHAEL				2. Issuer Name and Ticker or Trading Symbol Travel & Leisure Co. [TNL]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner				
(Last) (First) (Middle) C/O TRAVEL + LEISURE CO., 6277 SEA HARBOR DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 03/10/2021					X Officer (give title below) Other (specify below)  Chief Financial Officer					
(Street) ORLANDO, FL 32821				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City		(State)	(Zip)	,	Γable I - N	on-De	rivative S	Securitie	es Acqu	ired, Disp	osed of, or I	Beneficially (	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	if Code (Instr. 8	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Beneficially Owned Following Reported Transaction(s)		Ownership o Form:	Beneficial	
					Code	V	Amount	(A) or t (D)	Price	(Instr. 3 a	ind 4)			Ownership (Instr. 4)
Common	Stock		03/10/2021		A		6,548 (1)	A	\$ 0	38,674	(2)		D	
Common	Stock		03/10/2021		F		1,595 (3)	D	\$ 62.64	37,079	(2)		D	
Common	Stock									131,700	(4)		D	
Reminder:	Report on a s	eparate line i		Derivative Secur	ities Acqui	Person the red, D	sons wh tained ir form dis	o responding this for splays a	orm are a curre eneficial	not requesting ntly valid	OMB conf	formation spond unle trol numbe	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	(Month/Day/	ion 3A. Deemed Execution Day/Year) any	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or	5. Number of and Operivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		Date Exercisable Expiration Date onth/Day/Year)		itle and ount of lerlying urities tr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form of Derivating Security Direct (I or Indire	Beneficia Ownersh (Instr. 4)
				Code V	(A) (D		-	Expiration Date	on Title	Amount or Number of Shares				

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
HUG MICHAEL C/O TRAVEL + LEISURE CO. 6277 SEA HARBOR DRIVE ORLANDO, FL 32821			Chief Financial Officer			

### **Signatures**

/s/ James Savina as Attorney-in-Fact for Michael Hug	5
--	---

03/12/2021

***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) Common stock acquired on vesting of previously-granted restricted stock units which vested on March 7, 2021.
- (2) Includes previously reported shares of common stock.
- (3) Common stock withheld as payment toward the tax liability incident to the vesting of restricted stock units granted in accordance with Rule 16b-3 and delivery of shares in respect thereof.
- (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.