Barkin Michael Z Form 3 April 09, 2013

FORM 3

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

OMB APPROVAL

OMB Number:

3235-0104

0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005

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response...

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

SECURITIES

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person *

A Barkin Michael Z

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

04/08/2013

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

VAIL RESORTS INC [MTN]

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

EVP & Chief Financial Officer

5. If Amendment, Date Original

Filed(Month/Day/Year)

390 INTERLOCKEN CRESCENT, SUITE 1000

(Street)

Director

_X__ Officer

10% Owner Other (give title below) (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting

Person

Form filed by More than One

Reporting Person

4. Nature of Indirect Beneficial

BROOMFIELD, COÂ 80021

(City) (State) (Zip)

1. Title of Security

(Instr. 4)

Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities

Beneficially Owned

(Instr. 4)

Ownership

Form: Direct (D) Ownership (Instr. 5)

or Indirect

SEC 1473 (7-02)

(I) (Instr. 5)

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

> 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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

Date (Month/Day/Year)

2. Date Exercisable and Expiration 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

5. Conversion or Exercise Price of

Ownership Form of Derivative

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Date Exercisable Expiration Date

Title

Amount or Number of

Shares

Derivative Security

4.

Security: Direct (D) or Indirect

(I)

						(Instr. 5)	
Restricted Share Unit	07/30/2013(1)	07/30/2015(1)	Common Stock	1,713	\$ 0	D	Â
Restricted Share Unit	09/21/2013(2)	09/21/2015(2)	Common Stock	834	\$ 0	D	Â
Share Appreciation Right	07/30/2013(3)	07/30/2022(3)	Common Stock	1,457	\$ 50.11	D	Â
Share Appreciation Right	09/21/2013(4)	09/21/2022(4)	Common Stock	7,891	\$ 54.07	D	Â

Reporting Owners

Reporting Owner Name / Address		Relationships					
	Director	10% Owner	Officer	Other			
Barkin Michael Z 390 INTERLOCKEN CRESCENT, SUITE 1000 BROOMFIELD, CO 80021	Â	Â	EVP & Chief Financial Officer	Â			

Signatures

Adam Averbach, Attorney-in-fact for Michael Z.
Barkin
04/09/2013

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) On July 30, 2012, Reporting Person was granted 1,713 Restricted Share Units which vest in three equal annual installments commencing on the first anniversary of the grant date.
- (2) On September 21, 2012, Reporting Person was granted 834 Restricted Share Units which vest in three equal annual installments commencing on the first anniversary of the grant date.
- (3) On July 30, 2012, Reporting Person was granted 1,457 Share Appreciation Rights which vest in three equal annual installments commencing on the first anniversary of the grant date and expire 10 years from the grant date.
- (4) On September 21, 2012, Reporting Person was granted 7,891 Share Appreciation Rights which vest in three equal annual installments commencing on the first anniversary of the grant date and expire 10 years from the grant date.

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Remarks:

Exhibit List: Exhibit 24 - Power of Attorney

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.

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