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

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

OMB APPROVAL OMB Number:

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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

	pe Response	es)														
1. Name and Address of Reporting Person * Echevarria Maria I.				2. Issuer Name and Ticker or Trading Symbol Algodon Wines & Luxury Development Group, Inc. [VINO]							, Inc.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below)				
(Middle) 135 FIFTH AVENUE, FLOOR 10				3. Date of Earliest Transaction (Month/Day/Year) 02/14/2018						-			CFO			
(Street) NEW YORK, NY 10010				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				
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						s Acquire						
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year)	2A. Dee Execution any (Month)	on D	ate, if		8) (osed o	of (D) O			ed	Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common	Shares									(2)		75				see footnote
Reminder:		•											of inform			474 (9-02)
Reminder:		•														474 (9-02)
1. Title of	2. Conversion	3. Transaction Date (Month/Day/Year)	Table II - 1 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code	s, cal		ber ive	contair form d	splays a splays a osed of, or nvertible ercisable and Date	Bene secur	m are no ently val eficially O ities)	ot required id OMB co owned and Amount ying	to respondent of number of the second number of the	d unless th	f 10. Ownersh Form of	11. Nature of Indirec Beneficial Ownershi (Instr. 4)
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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	3A. Deemed Execution Date, if any	e.g., puts 4. Transac Code (Instr. 8	tion)	ls, warr 5. Numl of Derivat Securiti Acquire (A) or Dispose (D) (Instr. 3 and 5)	ber ive es ed ed of , 4,	contain form di	ed in this splays a seed of, or nvertible ercisable at Date y/Year)	Benessecurind	m are no ently value ficially Otties) 7. Title ar of Underl Securities (Instr. 3 a	Amount or Number of Shares	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	f 10. Ownersh Form of Derivativ Security Direct (I or Indire s) (I) (Instr. 4)	11. Nature of Indirec Beneficial Ownershi (Instr. 4)

Reporting Owners

B (0 Y /4 H	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Echevarria Maria I. 135 FIFTH AVENUE, FLOOR 10 NEW YORK, NY 10010			CFO			

Signatures

/s/ Maria Echevarria	02/16/2018
**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) Shares granted pursuant to the Company's 401(k) plan and held in Ms. Echevarria's 401(k) account.
- Options granted pursuant to AWLD's 2016 Equity Incentive Plan; options to acquire 6,256 shares vest on 2/14/19; thereafter options to acquire 18,744 shares vest in equal installments of 1,562 shares every three months.
- (3) Options granted pursuant to AWLD's 2016 Equity Incentive Plan; options to acquire 12,500 shares vest on 12/17/18; thereafter options to acquire 37,500 shares vest in equal

installments of 3,125 shares every three months.

Options granted pursuant to AWLD's 2008 Equity Incentive Plan; options to acquire 37,500 shares vested on June 8, 2016; thereafter options to acquire 9,375 shares vest every three months.

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

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.