FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | |
| Estimated average b | ourden | | | | | | | | |

0.5

hours per response:

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

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

| 1. Name and Address of Reporting Person* REED REBECCA C (Last) (First) (Middle) 700 CENTRAL AVENUE | | | | | 3. C | Issuer Name and Ticker or Trading Symbol CHURCHILL DOWNS INC [CHDN] 3. Date of Earliest Transaction (Month/Day/Year) 06/19/2007 | | | | | | | | heck all app Direc X Office below | tor er (give title | - | 10% Ov Other (s below) | vner specify | |
|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|---------------------------------------------|----------|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|-------|----------------------------------------|-------------------------------------------------------|------|----------------------|-------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-----------------------------------------------------|-------------------------------------------|--|
| (Street) LOUISV (City) | | tate) (| 40208 (Zip) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | X Form Form Perso | idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day) | | | | tion | on 2A. Deemed Execution Date, | | | 3. 4. S Transaction Code (Instr. | | | es Acquire | d (A) or | 5. Amo Securi Benefi Owned | ount of ties cially Following | Form: | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| Common Stock 06/19/20 Common Stock 06/19/20 | | | | | | | | | Code M S | v | Amount 3,672 3,672 | (A) or (D) | \$27.2 \$53.27 | | | D D | | (Instr. 4) | |
| | | Т | able II | - Deriva | tive S | | | | uired, | | oosed of converti | or Ben | eficiall | | , , , , | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deel Execution if any (Month/I | on Date, | i. Fransaction Code (Instr. 8) | | on of | | 6. Date Exercisi Expiration Date (Month/Day/Yea | | te | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | Owner: Form: Direct or Indi (I) (Inst | Ownership | Beneficial Ownership ect (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | ıble | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Employee Stock Option | \$27.23 | 06/19/2007 | | | М | | | 3,672 | 11/14/20 | 004 | 11/13/2011 | Common | 3,672 | \$0 | 0 | | D | | |

Explanation of Responses:

Remarks:

(right to buy)

Rebecca C. Reed

Common Stock

** Signature of Reporting Person

Date

06/20/2007

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

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

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 Number.

^{*} 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).