SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol CHURCHILL DOWNS INC [CHDN]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 700 CENTRAI	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/14/2011	X Director 10% Owner X Officer (give title below) Other (specify below) President and CEO				
(Street) LOUISVILLE (City)	KY (State)	40208 (Zip)	4. If Amendment, Date of 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 				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
	Code V					(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(mour 4)
Common Stock	08/14/2011		F		535	D	\$42.72	252,939 ⁽¹⁾	D	

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of Deriv Secu Acqu (A) o Dispe of (D	r osed) r. 3, 4	Expiration Date (Month/Day/Year)		Date of Securities		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option (right to buy)	\$36.16							(2)	08/14/2012	Common Stock	130,000		130,000	D	
Employee Stock Option (right to buy)	\$35.19							(3)	11/14/2016	Common Stock	180,000		180,000	D	
Restricted Stock	(4)							(5)	(5)	Common Stock	65,000		65,000	D	

Explanation of Responses:

1. Includes 500 shares of common stock acquired as of July 31, 2011, through the Churchill Downs Incorporated 2000 Employee Stock Purchase Plan, as amended, which is a Section 423 plan.

2. The option vests quarterly over three (3) years beginning on September 30, 2006.

3. The option vests quarterly over three (3) years beginning on September 30, 2010.

4. Each restricted stock unit represents a contractual right to receive one share of CHDN common stock.

5. The restricted stock units vest quarterly over five (5) years beginning September 30, 2006. Vested shares will be delivered to the reporting person six (6) months after termination of employment with CHDN.

<u>/s/ Robert L. Evans</u>	08/16/2011				
** Signature of Reporting Person	Date				

** Signature of Reporting Person

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

* 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).

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.