FORM 4

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

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

OMB Number: 3235-0287

OMB APPROVAL

Expires: January 31, 2005 Estimated average burden hours per response. . .0.5

| Theu pursuant to Section 10(a) of the Sectiones Exchange Act of 1934, Section 17(a) of the Fubility Office | , |
|------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | Filed By Romeo & Dye's Instant Form 4 Filer |
| | www.section16.net |
| | |
| | |

| | | | | | Name and Ticker or T ill Downs Incorporate | _ | | 6. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | |
|-----------------------------|----------------|---------|------|----------------------------------------------------------------------------------|-------------------------------------------------------------|----------------------|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------|--|--|
| (Last) 4501 Wolf Pen Bra | | Middle) | of R | epoi | Identification Number ting Person, ity (voluntary) | - 1 | atement for th/Day/Year 3/02 | X Officer (give title below) Other (specify below) Senior Vice President, Communications | | | | |
| (Street) Prospect, KY 40059 | | | | | | Date | Amendment, of Original nth/Day/Year) | 7. 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 Acquired, Disposed of, or Beneficially Owned | | | | | | | | |
| (Instr. 3) | Date Date, (In | | | ode | 4. Securities Acquired (Instr. 3, 4 & 5) Amount | (A) or D (A) or (D) | Price | Securities Beneficially Owned Follow- | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

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

| FORM 4 (continued) Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|---------------|----------|------------------|-------------------|----------------------|-------------|-------------|----------------|-------------|----------------|--------------|------------|
| 1. Title of | 2. Conver- | 3. | 3A. | 4. | 5. Number of I | Derivative | 6. Date | | 7. Title an | d | 8. Price of | 9. Number of | 10. | 11. Nature |
| Derivative | sion or | Trans- | Deemed | Trans- | Securities Acq | Exercisa | xercisable Amount of | | Derivative | Derivative | Owner- | of Indirect | | |
| Security | Exercise | action | Execution | action | Disposed of (D | and Expi | | Underlying | | Security | Securities | ship | Beneficial | |
| | Price of | Date | Date, | Code | ` ` ` ` | | Date | | Securities | | (Instr. 5) | Beneficially | Form | Ownership |
| (Instr. 3) | Derivative | | if any | | (Instr. 3, 4 & 5 | (Instr. 3, 4 & 5) | | (Month/Day/ | | (Instr. 3 & 4) | | Owned | of | (Instr. 4) |
| l` ´ | Security | l` | (Month/ | (Instr. | r ' ' | | Year) | Year) | | | Following | Deriv- | ľ <i>Í</i> [| |
| | | | Day/ Year) | 8) | | | | | | | | Reported | ative | |
| | | l'eur) | l'eur) | | | | | | | | | Transaction(s) | Security: | |
| | | | | Code | / (A) | (D) | Date | Expira- | Title | Amount | | ` ' | Direct | |
| | | | | Code | | | Exer- | tion | 11110 | or | |) / | (D) | |
| | | | | | | | cisable | Date | | Number | | | or | |
| | | | | | | | Cisabic | Date | | of | | | Indirect | |
| | | | | | | | | | | Shares | | | (I) | |
| | | | | | | | | | | Silaies | | | (Instr. 4) | |
| Employee Stock | 38 92 | 11/13/02 | | A | 4420 | | 11/13/05 | 11/12/12 | Common | 4420 | | 4420 | | |
| Option (right to | 50.52 | 11, 15, 02 | | `` | | | 11,15,05 | | Stock | -10 | | | ~ | |
| buy) | | | | | | | | | COCK | | | | | |

Explanation of Responses:

By: /s/ Karl F. Schmitt, Jr. Karl F. Schmitt, Jr. **Signature of Reporting Person 11/14/2002 Date

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).