FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

Dall Marcia A	Date of Event Requiring Statem Month/Day/Year 0/12/2015	nent	3. Issuer Name and Ticker or Trading Symbol CHURCHILL DOWNS INC [CHDN]								
(Last) (First) (Middle) 600 N. HURSTBOURNE PKWY			Officer (give title		10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)				
SUITE 400 (Street)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
LOUISVILLE KY 40222							Form filed b Reporting P	y More than One erson			
(City) (State) (Zip)											
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)			Beneficially Owned (Instr. 4) Form: D or Indire		3. Ownersh Form: Direct or Indirect (Instr. 5)	ect (D) (Instr. 5)					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Secur Underlying Derivative Securi		ity (Instr. 4) Conv		ise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
	Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Price of Derivativ Security					

Explanation of Responses:

No securities are beneficially owned.

Bridgett Gatewood, Attorney in fact for Marcia A. Dall

10/14/2015

** Signature of Reporting Person

Date

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 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).

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.