FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

hours per response: 0.5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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)						
Evans Robert L						TOIL	CII		<u> </u>	10	<u>1110</u> [011	ניים		X	Directo	or		10% O	wner	
(Last)	(=	irst)	(Middle	`	2 [O Data of Fasilinat Transporting (Marsh/DaviNess)									Officer below)	(give title		Other (below)	specify	
` '	٦) IURSTBOU		3. Date of Earliest Transaction (Month/Day/Year) 06/06/2014								Chairman and CEO									
SUITE 4																				
- JOHE -			- 4. i	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable								
(Street)										Line)										
LOUISVILLE KY 40222														X Form filed by One Reporting Person						
					-									Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																	
		Tab	le I - I	Non-Deriv	vative	e Sec	uriti	ies A	cquire	d, D	Disposed o	of, or E	enefic	ially	Owned	k				
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/Y					2A. De Execu if any (Mont	ition [3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Benefic Owned		ies ially Following	Form (D) o	n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price		Transac	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock 06/06/20:					014	14			М		4,156	A	\$35.	35.19		02,240		D		
Common Stock 06/06/201					014	14			S ⁽¹⁾		4,156	D	\$89.35	9.3595 ⁽²⁾		38,084		D		
		Ţ	able	II - Deriva	ative	Secu	ritie	s Acc	quired,	Dis	sposed of	, or Be	neficia	lly O	wned					
											, converti									
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		if any	eemed tion Date, h/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	er						
Employee Stock Option (right to	\$35.19	06/06/2014			M			4,156	(3)		11/14/2016	Commo Stock	ⁿ 4,15	6 s	89.3595	136,558	В	D		

Explanation of Responses:

buv)

- $1. \ The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on 3/28/2014.$
- 2. This transaction was effected in multiple trades ranging from \$88.25 to \$89.21. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide to SEC Staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 3. The option vests quarterly over three (3) years beginning on September 30, 2010.

/s/ Robert L. Evans 06/11/2014

** 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 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.