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WYNN RESORTS LTD

Form 4

February 17, 2015

FORM 4

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

OMB

Number:

Expires:

OMB APPROVAL

3235-0287

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, 2005

0.5

Section 16. Form 4 or

Estimated average burden hours per response...

Form 5 obligations may continue. See Instruction

Check this box

if no longer

subject to

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * SHOEMAKER ALVIN V

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

WYNN RESORTS LTD [WYNN]

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction

(Month/Day/Year)

02/13/2015

_X__ Director 10% Owner Officer (give title _ Other (specify

C/O WYNN RESORTS, LIMITED, 3131 LAS VEGAS **BOULEVARD SOUTH**

> (Street) 4. If Amendment, Date 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

LAS VEGAS, NV 89109

| (City) | (State) | (Zip) Tabl | e I - Non-D | erivative (| Securi | ties Acqu | iired, Disposed of | , or Beneficiall | y Owned |
|------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|----------------------------------------|---------------|--------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------------|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transactio Code (Instr. 8) | (Instr. 3, | sposed 4 and 5 (A) or | of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock, pa value \$0. per share | r 01 02/13/2015 | | Code V M | Amount 10,000 | (D) | Price \$ 52.94 | 12,500 | D | |
| Common Stock, pa value \$0. per share | r 01 02/13/2015 | | S | 10,000 | D | \$ 159 | 2,500 | D | |

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

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SEC 1474 (9-02)

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) | ate, if TransactionDerivative Code Securities | | 6. Date Exer Expiration E (Month/Day. | ate | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|-----------------------------------------------|---------|---------------------------------------------|--------------------|---------------------------------------------------------------------|-------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Stock Options (right to buy) | \$ 52.94 | 02/13/2015 | | M | 10,000 | <u>(1)</u> | 05/01/2015 | Common Stock, par value \$0.01 per share | 10,000 |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SHOEMAKER ALVIN V C/O WYNN RESORTS, LIMITED 3131 LAS VEGAS BOULEVARD SOUTH LAS VEGAS, NV 89109



Signatures

/s/ Kevin Tourek, attorney-in-fact for Alvin V. Shoemaker

02/17/2015

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) The options vested in four equal installments on May 1, 2006; May 1, 2007; May 1, 2008; and May 1, 2009.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2