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Form 4										
October 09,	ЛЛ	STATES SECU					OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287	
Check t if no lor subject Section Form 4 Form 5 obligation may con <i>See</i> Inst 1(b).	nger to 16. or Filed put ons stinue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 20(b) of the Investment Company Act of 1940								
(Print or Type	Responses)									
Vaughn Peter A Symbol			er Name and Ticker or Trading RESORTS INC [MTN]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(First) (RESORTS, INC. CKEN CRESCEN	(Month, 390 10/04/	of Earliest 7 /Day/Year) /2018	Fransaction	n	-	_X Director Officer (give t	10%) Owner r (specify	
	(Street)		nendment, D lonth/Day/Yes	-	nal	I	5. Individual or Joi Applicable Line) X_ Form filed by O	-	-	
BROOMF	ELD, CO 80021					– F	Form filed by Mo Person	ore than One Rej	porting	
(City)	(State)	(Zip) Ta	ble I - Non-	Derivativ	e Secu	rities Acqui	red, 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) Code V		(A) or	5) Price	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	10/04/2018		S	400	D	\$ 254.5869	9,372 <u>(1)</u>	D		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

1. Title of

Security

(Instr. 3)

Derivative

2.

Derivative

Security

Reporting Owner Name / Address	Relationships						
r g	Director	10% Owner	Officer	Other			
Vaughn Peter A C/O VAIL RESORTS, INC. 390 INTERLOCKEN CRESCENT BROOMFIELD, CO 80021	Х						
Signatures							
Emily S. Barbara, Attorney-in-Fact Vaughn	Α.	10/09/2018					
**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).
- The total amount includes 493 shares acquired in multiple periodic transactions under a dividend reinvestment plan, which shares were (1)inadvertently not reported by the Reporting Person during such time.

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4.

Code

(Instr. 8)

5.

of

Derivative

Securities

Acquired

Disposed

(Instr. 3, 4, and 5)

Date

Exercisable

(A) or

of (D)

Code V (A) (D)

TransactionNumber

6. Date Exercisable and

Expiration

Date

Expiration Date

(Month/Day/Year)

7. Title and

Amount of

Underlying

(Instr. 3 and 4)

Amount or

Title Number

of

Shares

Securities

8. Price of

Derivative

Security

(Instr. 5)

9. Nt

Deriv

Secu

Bene

Own

Follo

Repo

Trans

(Insti

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.

3. Transaction Date 3A. Deemed Conversion (Month/Day/Year) Execution Date, if or Exercise any Price of (Month/Day/Year)