## Edgar Filing: WYNN RESORTS LTD - Form 4

WYNN RES	SORTS LTD												
Form 4													
December 1										0.45			
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									APPROVAL 3235-0287				
Check th if no long subject to	o states	<b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP</b>									Expires: January 3 200 Estimated average		
Section 16.       SECURITIES       Definition divides         Form 4 or       Form 5       burden hours per response         Form 5       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         see Instruction       30(h) of the Investment Company Act of 1940       1940									•				
(Print or Type	Responses)												
WYNN STEPHEN A Symbo				ssuer Name <b>and</b> Ticker or Trading ool NN RESORTS LTD [WYNN]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (1	Middle)	3. Date of Earliest Transaction					-	(Check all applicable)				
			(Month/Day/Year) 12/13/2016						_X_ Director _X_ 10% Owner _X_ Officer (give title _X_ Other (specify below) below) Chief Executive Officer / WFLP is member of 10% owner				
(Street) 4. If Am			endment, Date Original					6. Individual or Joint/Group Filing(Check					
Filed(Mo LAS VEGAS, NV 89109				onth/Day/Year)					Applicable Line) Form filed by One Reporting Person _X_ Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tabl	le I - Non	-De	rivative	Securi	ties Ac	quired, Disposed o	of, or Benefic	ially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	ed Date, if	3. Transact Code (Instr. 8)	tion( (	4. Securi	ties Aco sposed	quired of	5. Amount of	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect		
Common Stock, par value \$0.01 per share	12/13/2016					72,851		\$ 0	12,000,000	I	By Wynn Family Limited Partnership		

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.

### Edgar Filing: WYNN RESORTS LTD - Form 4

 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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
WYNN STEPHEN A C/O WYNN RESORTS, LIMITED 3131 LAS VEGAS BOULEVARD SOUTH LAS VEGAS, NV 89109	Х	Х	Chief Executive Officer	WFLP is member of 10% owner				
Wynn Family Limited Partnership C/O WYNN RESORTS, LIMITED 3131 LAS VEGAS BOULEVARD SOUTH LAS VEGAS, NV 89109	Х			Member of 10% owner group				
Signatures								
/s/ Stephen Cootey, attorney-in-fact for	12/15/2016							
<u>**</u> Signature of Report	Date							
/s/ Stephen Cootey, attorney-in-fact fo Partnership	12/15/2016							
<u>**</u> Signature of Report	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) Charitable gift.

#### **Remarks:**

### Edgar Filing: WYNN RESORTS LTD - Form 4

Exhibit List: Exhibit 24 - (1) Power of Attorney (Stephen A. Wynn); (2) Power of Attorney (Wynn Family Limited Partnershi

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.