Edgar Filing: EMPIRE RESORTS INC - Form 4

EMPIRE RE	SORTS INC										
Form 4											
May 03, 2017	7										
FORM	4								PPROVAL		
	D STATES	SECURITIES AND EXCHANGE COMM Washington, D.C. 20549					COMMISSION	OMB Number:	3235-0287		
Check this box									Expires:	January 31,	
if no long subject to	F CHANGES IN BENEFICIAL OW					NERSHIP OF	Estimated a	2005 2005			
Section 16.				SECURITIES					burden hou	0	
Form 4 or									response	•	
Form 5 obligation	· · · · · · · · · · · · · · · · · · ·	b						ge Act of 1934,			
may conti				•	•	• •		f 1935 or Sectio	n		
See Instru		30(h)	of the Inv	vestment (Compan	y Act	t of 19	40			
1(b).											
(Print or Type R	(esponses)										
X J1	1 ,										
Degliomini Charles Symbo			2. Issuer	er Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer				
			Symbol	-							
			EMPIRE RESORTS INC [NYNY]				NY]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction			(Check an applicable)					
× /	× /		(Month/Da					Director	10%	6 Owner	
C/O MONT	ICELLO CAS	SINO AND	05/01/20	-				$X_ Officer (giv$		er (specify	
RACEWAY	, ROUTE 17E	B, P.O.						below)	below) EVP		
BOX 5013									2,1		
	(Street)		4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
				iled(Month/Day/Year)				Applicable Line)			
								X Form filed by One Reporting Person Form filed by More than One Reporting			
MONTICEL	LO, NY 1270)1						Person	More than One Ro	eporting	
(City)	(State)	(Zip)	Table	I - Non-De	erivative (Securi	ities A c	quired, Disposed o	f or Reneficial	llv Owned	
1 Title of	2 Transaction	Data 24 Daa		3.	4. Securi		nies ne	5. Amount of	6. Ownership	-	
1.Title of Security	2. Transaction 1 (Month/Day/Ye		on Date, if				or	Securities	Form: Direct	Indirect	
(Instr. 3)	(1101111,24),11	any	on Date, if TransactionAcquired (A) or Code Disposed of (D)				Beneficially	(D) or Be Indirect (I) Ov	Beneficial		
		(Month/	Day/Year)				Owned		Ownership		
								Following Reported	(Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)			
				Codo V	Amount	or	Drigo	(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price				
Stock, \$.01							\$0				
par value	05/01/2017			А	1,000	А	(1)	11,526	D		
per share											

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

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 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. Transacti Code (Instr. 8)	5. orNumber 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

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Degliomini Charles C/O MONTICELLO CASINO AND RACEWAY ROUTE 17B, P.O. BOX 5013			EVP			
MONTICELLO, NY 12701 Signatures						
/s/ Charles						

Degliomini 05/03/2017 <u>**</u>Signature of Date Reporting Person

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) Mr. Degliomini was granted 1,000 restricted stock units ("RSUs") under the Empire Resorts, Inc. 2015 Equity Incentive Plan, which RSUs vest annually in three equal installments, with the first installment vesting on May 1, 2018.

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.