## Edgar Filing: Cochrane Luther P - Form 4

Cochrane Lut Form 4	her P										
July 27, 2012											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								PPROVAL 3235-0287			
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b).	er <b>STAT</b> 5. Filed p s Section 1	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							Expires: Estimated a burden hou response	irs per	
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> Cochrane Luther P			2. Issuer Name <b>and</b> Ticker or Trading Symbol AMERISTAR CASINOS INC [ASCA]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 3773 HOWA PKWY, SUI	(First) ARD HUGHE TE 490S	(Middle) S	3. Date of (Month/Da 07/25/20	-	nsaction			X Director Officer (give below)		b Owner er (specify	
				ndment, Dat h/Day/Year)	-			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
								Person			
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executio any	on Date, if TransactionAcquired (A) or Se Code Disposed of (D) Be /Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Ov Fo (A) Tr			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	07/25/2012			А	4,870 (1)	A	\$0	23,620 <u>(2)</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)

## Edgar Filing: Cochrane Luther P - Form 4

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. Number prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		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)	\$ 16.68	07/25/2012		А	8,210	07/24/2013 <u>(3)</u>	07/25/2022	Common Stock	8,210

## **Reporting Owners**

Relationships						
Director	10% Owner	Officer	Other			
х						
07/2						
E	Date					
	X 07/2	Director 10% Owner	Director 10% Owner Officer X 07/27/2012			

## **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) Constitutes a grant of restricted stock units, each of which represents a right to receive one share of common stock in the future. Such restricted stock units vest in four equal, annual installments commencing on July 24, 2013.
- (2) Balance includes previously reported restricted stock units, each of which constitutes the right to receive one share of common stock in the future.
- (3) Options vest in four equal, annual installments commencing on July 24, 2013.

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.