

MONARCH CASINO & RESORT INC  
 Form 4  
 October 05, 2015

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
**FARAHI BOB**  
  
 (Last) (First) (Middle)  
**MONARCH CASINO & RESORT INC, 3800 S. VIRGINIA STREET**  
 (Street)  
**RENO, NV 89502**  
 (City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol  
**MONARCH CASINO & RESORT INC [MCR]**

3. Date of Earliest Transaction (Month/Day/Year)  
**10/01/2015**

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer  
 (Check all applicable)  
 Director  10% Owner  
 Officer (give title below)  Other (specify below)  
**President**

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			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 Ownership (Instr. 4)
				Code	V	Amount			
Common Stock	10/01/2015		J			300,000	D	520,614	D
Common Stock	10/01/2015		J			100,000	A	435,000	I by trust
Common Stock	10/01/2015		J			100,000	A	434,626	I by trust
Common Stock	10/01/2015		J			100,000	A	100,000	I by trust

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

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(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)	4. Transaction Code (Instr. 8)	5. Number of 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)	8. Amount or Number of Shares
Option/right to buy	\$ 12.32					10/21/2017 10/21/2024	Common Stock	33,334
Option/right to buy	\$ 21.71					10/21/2016 10/21/2023	Common Stock	33,334
Option/right to buy	\$ 8.56					10/09/2015 10/09/2022	Common Stock	33,334
Option/right to buy	\$ 9.33					10/21/2014 10/21/2021	Common Stock	33,334
Option/right to buy	\$ 29					10/21/2010 10/21/2017	Common Stock	33,334
Option/right to buy	\$ 21.82					10/21/2009 10/21/2016	Common Stock	33,334

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
FARAHI BOB MONARCH CASINO & RESORT INC 3800 S. VIRGINIA STREET RENO, NV 89502	X		President	

## Signatures

Bob Farahi

10/05/2015

\*\*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).

In connection with estate planning, the shares were transferred to three separate irrevocable trusts, for which reporting person is a trustee, (1) in exchange for a promissory note. The principal amount of the note was based on a price per share of \$17.72. The note provides for the payment of interest at an annual rate of 1.67%.

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.