Edgar Filing: AMERISTAR CASINOS INC - Form 4

AMERISTAF Form 4 June 04, 2007	R CASINOS IN	C									
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISS								OMB APPROVAL		
-		SECURITIES AND EXCHANGE COM Washington, D.C. 20549					OMB Number:	3235-0287			
Check this if no longe										January 31,	
subject to	F CHANGES IN BENEFICIAL OWN					NERSHIP OF	Expires: Estimated a	2005 average			
Section 16.				SECURI	TIES				burden hours per		
Form 4 or Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						A (C1024	response	0.5		
obligation								ge Act of 1934, f 1935 or Sectio	n		
may contin	nue.		of the Inv	•	•	· ·			11		
See Instruction 1(b).	ction	50(II)	of the fire	content	compan	y Aci	. 01 1 7	+0			
(Print or Type R	esponses)										
BOUSHY JOHN M Symbol				suer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
				AMERISTAR CASINOS INC							
			[ASCA]					(Check all applicable)			
(Last)	(First) ((Middle)	3. Date of	Earliest Tra	nsaction			_X_ Director	10%	6 Owner	
				Month/Day/Year)				X_ Officer (give title Other (specify below) below)			
				5/01/2007				President and CEO			
PKWY, SUI	TE 490S										
			4. If Amer	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mont	ed(Month/Day/Year)				Applicable Line)			
	NU 20160			_X				_X_ Form filed by One Reporting Person Form filed by More than One Reporting			
LAS VEGAS	5, NV 89169							Person		1 0	
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Da	med 3. 4. Securities					5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year	r) Executi	on Date, if TransactionAcquired (A) or Code Disposed of (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Securities	Form: Direct	Indirect	
(Instr. 3)		any (Month)						Beneficially Owned	D) or Indirect (I)	Beneficial Ownership	
		(Wonth)	Day Tear)					Following	Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
G				Code V	Amount	(D)	Price	(insu: 5 and 1)		 '1	
Common Stock (1)	06/01/2007			А	220	А	\$0	97,037	Ι	Family Trust ⁽²⁾	
SIUCK (1)										11ust (2)	

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)

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

Edgar Filing: AMERISTAR CASINOS INC - Form 4

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BOUSHY JOHN M 3773 HOWARD HUGHES PKWY SUITE 490S LAS VEGAS, NV 89169	Х		President and CEO				
Signatures							
Peter C. Walsh, Attorney-in-Fact	06/04/2	007					
**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).
- (1) Constitutes grant of restricted shares that vest in two equal, annual installments commencing on January 1, 2008.
- (2) Securities owned by The John and Lisa Boushy Family Trust, dated April 9, 2004, of which Mr. Boushy and his spouse are co-trustees.

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. le 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.