Edgar Filing: VAIL RESORTS INC - Form 4

VAIL RESO	RTS INC											
Form 4												
October 17, 2	2008											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OND	2006 000			
Check this	s box		Was	hington,	D.C. 205	549			Number:			
	if no longer					CIA			Expires:	January 31, 2005		
subject to STATEMENT OF CHANGES IN BENEFICIAL						LOW	NERSHIP OF	Estimated	Estimated average burden hours per			
Section 16 Form 4 or					SECURITIES							
Form 5								response	response 0.5			
obligation	1S Section 17(. ,			•	of 1935 or Section	n			
may conti	nue.		of the In	•	•	- ·			511			
See Instru 1(b).	ction	()			r	,						
(Print or Type R	esponses)											
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Tradin					Fradin	g	5. Relationship of Reporting Person(s) to Issuer					
MICHELETTO JOE R Symbol								100401				
			VAIL R	ESORTS	INC [M	ſŊJ		(Che	ck all applicabl	e)		
(Last)	(First) (N	Middle)	3. Date of Earliest Transaction									
	FOODTO NO	200	(Month/D	-			X_ Director 10% Owner Officer (give title Other (specify					
C/O VAIL RESORTS, INC., 390 10/15/20 INTERLOCKEN CRESCENT, STE.				J08				below)				
1000	KEN CKESCEN	1, 51E.										
1000			4 76 4	1	o · · · 1			< T 11 1 1 T				
(Street) 4. If Amen Filed(Month				ndment, Date Original				6. Individual or Joint/Group Filing(Check				
				n/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
BROOMFIE	LD, CO 80021							Form filed by	More than One R			
								Person				
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Dat	e 2A. Deemed		3. 4. Securities					6. Ownership			
Security	(Month/Day/Year)						Securities	Form: Direct	Indirect			
(Instr. 3)		any (Month	/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership			
					Following	(Instr. 4)						
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
0				Code V	Amount	(D)	Price	(insures und 1)				
Common	10/15/2008			М	1,811 (1)	А	\$0	14,998	D			
Stock					(1)							

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)

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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. Number on f 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
Restricted Share Units	\$ 0 <u>(2)</u>	10/15/2008		М	1,811 (1)	10/15/2008	10/15/2008	Common Stock	1,811

Reporting Owners

Reporting Owner Name / Address		Relationships						
1	Dire	ector	10% Owner	Officer	Other			
MICHELETTO JOE R C/O VAIL RESORTS, INC. 390 INTERLOCKEN CRESCENT, STE. 10 BROOMFIELD, CO 80021	000	X						
Signatures								
Fiona E. Arnold by Power of Attorney	10/17/20	08						
**Signature of Reporting Person	Date							
Example a strain of Description of								

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) On October 15, 2007, Reporting Person was granted 1,811 Restricted Share Units that vest in one installment on the first anniversary of the grant date.
- (2) Each Restricted Share Unit represents a contingent right to receive one share of common stock.

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.