## KATZ ROBERT A

Form 4/A September 29, 2008

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

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 \* KATZ ROBERT A

2. Issuer Name and Ticker or Trading Symbol

VAIL RESORTS INC [MTN]

(First) (Middle) (Last) 3. Date of Earliest Transaction

(Month/Day/Year) 09/23/2008

(Zip)

C/O VAIL RESORTS, INC., 390 INTERLOCKEN CRESCENT, STE. 1000

(State)

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

09/25/2008

6. Individual or Joint/Group Filing(Check

Applicable Line)

\_X\_\_ Director

X\_ Officer (give title

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

5. Relationship of Reporting Person(s) to

(Check all applicable)

Chief Executive Officer

10% Owner

Other (specify

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

Issuer

below)

**BROOMFIELD, CO 80021** 

(City)

1. Title of 2. Transaction Date 2A. Deemed Security (Instr. 3)

(Month/Day/Year) Execution Date, if (Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following Reported

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I) (Instr. 4) (Instr. 4)

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

(A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price

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)

3. Transaction Date 3A. Deemed 1. Title of Derivative (Month/Day/Year) Execution Date, if Conversion

5. Number Transaction Derivative Date

6. Date Exercisable and Expiration

7. Title and Amou Underlying Securi

#### Edgar Filing: KATZ ROBERT A - Form 4/A

Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code Securities (Instr. 8) Acquired (A) or Disposed (D) (Instr. 3, and 5)		d d of	(Month/Day/Year	)	(Instr. 3 and 4)		
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Shar
Restricted	Φ Ω (2)	00/02/2000				5.000		00/02/0000(3)	00/02/0011(3)	Common	<i>-</i> 0

Α

# **Reporting Owners**

 $\$ 0 \stackrel{(2)}{=}$ 

Reporting Owner Name / Address	Keiationsinps						
	Director	10% Owner	Officer	Other			

KATZ ROBERT A C/O VAIL RESORTS, INC. 390 INTERLOCKEN CRESCENT, STE. 1000 BROOMFIELD, CO 80021

X Chief Executive Officer

Deletionship

5,260

09/23/2009(3) 09/23/2011(3)

5,2

Stock

# **Signatures**

Share Unit

(1)

Fiona E. Arnold, by Power of Attorney 09/29/2008

09/23/2008

\*\*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).
- Amendment being filed to correct an error in reporting the 5,260 RSU's in the "Disposed of" box under column 5 of Table II on the original Form 4 rather than the "Acquired" box as intended.
- (2) Each Restricted Share Unit represents a contingent right to receive one share of common stock.
- (3) On September 23, 2008, Reporting Person was granted 5,260 Restricted Share Units which vest in three equal annual installments commencing on the first anniversary of the grant date.

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.

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