Rankin R Alex Form 4 December 27, 201

December 27, 2018 **FORM 4**

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

Number: 3235-0287

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Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

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

may continue.

See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

12/26/2018

Stock

| 1. Name and A | Person * 2. Issue Symbol | er Name an | d Ticker or | r Trading | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|---------------------------------------|--------------------------|--------------------|--------------------------------|------------|---|---|------------------|--------------|--|
| a a | | | | Inc [CHDN | | | | | |
| (Last) | (First) (| | of Earliest T | ransaction | | | | | |
| | | (Month/ | Day/Year) | | | _X_ Director | | Owner | |
| 600 N. HURSTBOURNE PKWY, SUITE 400 | | | 12/26/2018 | | | Officer (give below) | below) | er (specify | |
| | | | 4. If Amendment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | | |
| | Filed(Mo | onth/Day/Yea | ar) | | Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| LOUISVIL | LE, KY 40222 | | | | | • | More than One Re | | |
| (City) | (State) | (Zip) Tak | ole I - Non- | Derivative | Securities A | cquired, Disposed of | f, or Beneficial | lly Owned | |
| 1.Title of | 2. Transaction Date | 2A. Deemed | 3. | 4. Securi | ties Acquired | 5. Amount of | 6. | 7. Nature of | |
| Security | (Month/Day/Year) | Execution Date, if | Transacti | | isposed of (D | | Ownership | Indirect | |
| (Instr. 3) | | any | Code | (Instr. 3, | 4 and 5) | Beneficially | Form: | Beneficial | |
| | | (Month/Day/Year) | (Instr. 8) | | | Owned | Direct (D) | Ownership | |
| | | | | | | Following | or Indirect | (Instr. 4) | |
| | | | | | (A) | Reported | (I) | | |
| | | | | | or | Transaction(s) | (Instr. 4) | | |
| C. | | | Code V | Amount | (D) Pric | (Instr. 3 and 4) | | | |
| Common | 12/26/2018 | | D | 100 | , \$ | 12 236 8180 | D | | |

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

P

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SEC 1474

(9-02)

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D

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

100

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| 1. Title of | 2. | 3. Transaction Date | | 4. | 5. | 6. Date Exerc | | 7. Titl | | 8. Price of | 9. Nu |
|--------------------------------------|---|---------------------|---|---------------------------------|--|---------------------|--------------------|------------------------------------|--|--------------------------------------|---|
| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transacti Code (Instr. 8) | ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | Amou Under Securi (Instr. | rlying | Derivative Security (Instr. 5) | Deriv Secur Bene Own Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Rankin R Alex 600 N. HURSTBOURNE PKWY SUITE 400 LOUISVILLE, KY 40222 | X | | | | | |

Signatures

/s/ Paula Chumbley, Attorney-in-fact For R. Alexander
Rankin
12/27/2018

**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).

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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