SELWOOD ROBERT

Form 4

September 08, 2017

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 Fi obligations may continue. See Instruction

1. Name and Address of Reporting Person *

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

2. Issuer Name and Ticker or Trading

30(h) of the Investment Company Act of 1940

1(b).

Stock

\$.01 Par

Value ND

09/06/2017

(Print or Type Responses)

	SELWOOI	O ROBERT		Symbol					uer			
ľ				MGM	MGM Resorts International [MGM]				(Check all applicable)			
	(Last)	(First)	(Middle)			Γransaction						
3600 LAS VEGAS BLVD. SOUTH			(Month/Day/Year) 09/06/2017				bel	Director 10% Owner X Officer (give title Other (specify below) below) EVP - CHIEF ACCOUNTING OFFICER				
		(Street)		4. If Am	endment, I	Date Original	l	6.	Individual or Join	t/Group Filing	g(Check	
				Filed(Mo	onth/Day/Ye	ar)		Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting				
	LAS VEGA	AS, NV 89109						Per	son	re man One Rep	orung	
(City) (State) (Zip) 1.Title of 2. Transaction Date 2A. Deen				Table I - Non-Derivative Securities Acq					uired, 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)		Code (Instr. 8)	4. Securities Acquired (A) or orDisposed of (D) (Instr. 3, 4 and 5) (A) or			r 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 Indirect Beneficial Ownership (Instr. 4)	
	Common Stock \$.01 Par Value ND	09/06/2017			Code V M	Amount 100,000	(D)	Price	197,993	D		
	Common Stock \$.01 Par Value ND	09/06/2017			F	59,675	D	\$ 33.8	138,318	D		
	Common							\$				

S

40,325

D

(1)

33.8646 97,993

D

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

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SEC 1474

(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. 5. Number of TransactionDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Expiration Da (Month/Day/ or D)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Secur (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Am Nur Sha	
Employee Stock Appreciation Rights	\$ 10.32	09/06/2017		M	100,00	0 09/12/2012	2 09/12/2018	Common Stock \$.01 Par Value ND	10	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SELWOOD ROBERT 3600 LAS VEGAS BLVD. SOUTH LAS VEGAS, NV 89109 EVP - CHIEF ACCOUNTING OFFICER

Signatures

/s/ Andrew Hagopian III, Attorney-In-Fact

09/08/2017

**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).

The price reported is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$33.775 to \$33.95,

(1) inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.

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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