Edgar Filing: SARTINI BLAKE L - Form 4

Form 4	SLAKE L											
December (OMB AP	PROVAL		
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287		
Check t if no lor subject Section Form 4	nger STATEN 16.								Expires: January 20 Estimated average burden hours per response			
Form 5 obligations may continue. See Instruction 1(b). 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 SARTINI I	5	2. Issuer Name and Ticker or Trading Symbol STATION CASINOS INC [STN]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last)	(First) (A	· · ·	3. Date of Earliest Transaction					(Спеск	eck an applicable)			
2411 WEST SAHARA AVENUE			(Month/Day/Year) 11/29/2004					_X_ Director10% Owner Officer (give titleOther (specify below)below)				
				endment, D nth/Day/Yea	Date Origina ar)	ıl	A	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
LAS VEGA	AS, NV 89102						_	Form filed by Mo erson				
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	saction Date 2A. Deemed /Day/Year) Execution Date, if any (Month/Day/Year)			4. Securit por Dispos (Instr. 3, 4	ed of (5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common				Code V	Amount	(D)	Price \$	(Instr. 3 and 4)		By Trust		
Stock	11/29/2004 <u>(1)</u>			S	16,500	D	ф 56.9593	3,909,685	Ι	(2)		
Common Stock	11/30/2004(1)			S	3,500	D	\$ 57.4653	3,906,185	Ι	By Trust		

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)

Edgar Filing: SARTINI BLAKE L - Form 4

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Number Expiration Date		Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities Acquired			(Instr.	3 and 4)		Owne
	Security										Follo
	2				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
					., und c)						
									Amount		
						Data	Evaluation		or		
						Date Exercisable	Expiration Date		Number		
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

SARTINI BLAKE L 2411 WEST SAHARA AVENUE X LAS VEGAS, NV 89102

Signatures

Blake L. Sartini 12/01/2004

<u>**</u>Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) This transaction was executed pursuant to a Rule 10b5-1 Sales Plan. The implementation date was November 9, 2004 and the termination date is May 6, 2005.
- (2) The Blake L. Sartini and Delise F. Sartini Family Trust u/a/d 9/16/91, as amended and restated.

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.