FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| | Washingto | on, D.C. 20549 | |
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| | | | |
| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |

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| 5-0287 |
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| 0.5 |
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* SCHORR MARC D | | | | | | 2. Issuer Name and Ticker or Trading Symbol WYNN RESORTS LTD [WYNN] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | | |
|--|-------|--|---|-------------------------|------|--|------------------|--|----------------|--------------------------------|-------------------------|---|--|---|--|---|--|-----|
| (Last) (First) (Middle) C/O WYNN RESORTS, LIMITED 3131 LAS VEGAS BOULEVARD SOUTH | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/15/2009 | | | | | | | | X | below) below) Chief Operating Officer | | | | | | |
| (Street) | GAS N | V | 89109 | | | f Amer /16/20 | | Date (| of Origir | nal File | ed (Month/Da | ay/Year) | | 6. Indiv Line) X | Form | n filed by One | Filing (Check A Reporting Pers te than One Rep | son |
| (City) | (St | | (Zip) | | | | | | | | | | | | | | | |
| | | Tab | le I - N | | | | | s Ac | | d, Di | sposed o | | | | | | | |
| Da | | 2. Transaction Date (Month/Day/Year) | | Execution Date, | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at | | and 5) Secur Benef Owne | | ficially ed Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | |
| Common Stock, par value \$0.01 | | | 12/15/2 | /15/2009 | | | | G | V | 25,000 | D | \$0.00 | | 25 | 50,000 | D | | |
| Common Stock, par value \$0.01 | | 12/15/2009 | | | | | G V 25,000 A | | A | \$0.00 | | 25,000 | | I | By the Marc D. Schorr and Jane R. Schorr Living Trust | | | |
| Common Stock, par value \$0.01 | | 12/15/2009 | | | | | S ⁽¹⁾ | | 9,200 | D | \$62.644 ⁽²⁾ | | 15,800 | | I | By the Marc D. Schorr and Jane R. Schorr Living Trust | | |
| | | Т | able II | | | | | | | | osed of, convertib | | | | wned | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 2. Conversion Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Date Execution Date, if any (Month/Day/Year) | | emed ion Date, | 4. Transa | 5. Number of Derivative | | 6. Date Exercisabl Expiration Date (Month/Day/Year) | | isable and te Amount of Securities Underlying Derivative Security (Instr. and 4) | | 8. Pi Deri Seci (Inst | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | Code | v | (A) | (D) | Date Exerci | sable | Expiration Date | | or Numbe of Shares | | | | | |

Explanation of Responses:

- 1. These shares were sold pursuant to a trading plan that was entered into on December 7, 2009 and that is intended to comply with Rule 10b5-1 under the Securities Exchange Act of 1934, as amended.
- 2. Amendment filed to correct price from \$62.444 to \$62.644.

Remarks:

/s/ Kevin Tourek, Attorney-infact for Marc D. Schorr

12/21/2009

** Signature of Reporting Person

Date

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

- * 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.

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 Number.