FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
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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 STROM DAR | 2. Date of Event Requiring Statement (Month/Day/Year) 10/14/2020 3. Issuer Name and Ticker or Trading Symbol WYNN RESORTS LTD [WYNN] | | | | | | | | | | | |
| (Last) C/O WYNN RESt 3131 LAS VEGA: (Street) LAS VEGAS (City) | (First) DRTS, LIMITED S BOULEVARD SC NV (State) | (Middle) DUTH 89109 (Zip) | | | | onship of Reporting Person(s) to Is all applicable) Director Officer (give title below) | 1 | 10% Owner Other (specify | below) | | ividual or Joint/Gro | Original Filed (Month/Day/Year) up Filing (Check Applicable Line) one Reporting Person fore than One Reporting Person |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | 2. Amount Owned (In | t of Securities Beneficially estr. 4) | Dir | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| No Securities Own | ed | | | | | 0 | | D | | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 4) 2. Date Exercisable an Expiration Date (Month/Day/Year) | | | Security (Instr. 4) Conversion Exerci | | | cise | 5. Ownership Form: Direct (D) or Indirect (I) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | | | |
| | | Date Exercis | Expiratio ble Date | n Title | | | Amount or Number of Shares | Price of Derivative Security | | (Instr. 5) | | |
| Evaluation of Deepe | neae: | | | | | | | | | | | |

Remarks:

Exhibit List: Exhibit 24 - Power of Attorney

/s/ Nicholas Pannucci, attorney-in-fact for Darnell O. Strom 10/23/2020

** 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 5 (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.

Power of Attorney

KNOW ALL MEN BY THESE PRESENTS, that the person whose signature appears below revokes all prior Powers of Attorney relating to Section 16 of tl This power of attorney shall be valid from the date hereof until revoked by the undersigned.

IN WITNESS WHEREOF, the undersigned has executed this instrument effective as of the 20th day of October, 2020.

Signed: /s/ Darnell O. Strom Darnell O. Strom