#### CENTURY CASINOS INC/CO/

Form 4

November 12, 2015

## FORM 4

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

burden hours per response... 0.5

Estimated average

See Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * HOETZINGER PETER	2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer				
	CENTURY CASINOS INC /CO/ [CNTY]	(Check all applicable)				
(Last) (First) (Middle) 455 E PIKES PEAK AVE STE 210	3. Date of Earliest Transaction (Month/Day/Year) 11/10/2015	_X_ Director 10% OwnerX_ Officer (give title Other (specify below) below)  Vice Chairman/Co CEO/President				
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
COLODADO CODINCE CO 90002		Form filed by More than One Reporting				

Person

#### COLORADO SPRINGS, CO 80903

(City)	(State)	(Zip) Tab	le I - Non-	Derivative	Secu	rities Ac	equired, Dispose	d of, or Benef	icially Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				5. Amount of 6. Securities Ownership Beneficially Form: Owned Direct (D) Following or Indirect Reported (I) Transaction(s) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Stock	11/10/2015		S	24,672	D	\$ 6.75	157,605	D	
Common Stock	11/11/2015		S	371	D	\$ 6.7	157,234	D	
Common Stock	11/12/2015		S	3,258	D	\$ 6.6	153,976	D	
Common Stock							1,123,000	I	By Management Company
Common Stock							94,397	I	By Family Trust

### Edgar Filing: CENTURY CASINOS INC /CO/ - Form 4

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.

SEC 1474 (9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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

<ol> <li>Title of</li> </ol>	2.	3. Transaction Date	3A. Deemed	4.		5.	6. Date Exerc	cisable and	7. Tit	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transa	ction	Number	Expiration D	ate	Amou	ınt of	Derivative
Security	or Exercise		any	Code		of	(Month/Day/	Year)	Unde	rlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr.	8)	Derivative	•		Secur	ities	(Instr. 5)
	Derivative		•			Securities			(Instr	. 3 and 4)	
	Security					Acquired			Ì		
	Ĭ					(A) or					
						Disposed					
						of (D)					
						(Instr. 3,					
						4, and 5)					
						, ,					
										Amount	
							Date	Expiration		or	
							Exercisable	Date	Title	Number	
							Excicisable	Date		of	
				Code	V	(A) (D)				Shares	

## **Reporting Owners**

Reporting Owner Name / Address	

Director 10% Owner Officer Other

Relationships

HOETZINGER PETER 455 E PIKES PEAK AVE STE 210 COLORADO SPRINGS, CO 80903

X

Vice Chairman/Co CEO/President

# **Signatures**

/s/ Margaret Stapleton as Attorney-in-Fact

11/12/2015

\*\*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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