FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
obligations may continue. See	
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APP	ROVAL
OMB Number:	3235-0287
Estimated average	burden
hours per response	0.5

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

Name and Address of Reporting Person* Lloyd Karole				2. Issuer Name and Ticker or Trading Symbol Churchill Downs Inc [CHDN]							(Che	eck all app	ationship of Reporting F k all applicable) Director		10% Owner			
(Last)	(F	irst) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/23/2024									Office below	er (give title		Other (s below)	pecify
600 N. HURSTBOURNE PKWY SUITE 400				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicative) X Form filed by One Reporting Person			·			
(Street) LOUISVILLE KY 40222													Form filed by More than One Reporting Person				orting	
(City)	(S		Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								ided to					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				Execut y/Year) if any		eemed ution Date, th/Day/Year)		3. Transaction Code (Instr. 8) 4. Securitie Disposed O 5)		s Acquired (A) of of (D) (Instr. 3, 4		A) or , 4 and	Securit Benefic	Securities F Beneficially (I Owned Following (I		Direct Indirect I	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	mount (A)		Price	Transa	ction(s) 3 and 4)			(Instr. 4)
Common	Stock			04/23/2	2024			A		1,255.06	1) A \$0 ⁽²⁾		2) 35,621.98 ⁽³⁾]	D		
	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)	Execution Date, Transa			of Deriv	r osed) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		str.	B. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indirect (I) (Instr.	wnership orm:	Beneficial Ownership (Instr. 4)
					Code	Code V (A) (D)		Date Expiration Exercisable Date		Title	or Num of Shar							

Explanation of Responses:

- 1. Restricted stock granted in connection with 2024 director service which will vest one year from the anniversary of the grant date. The restrictions on the restricted stock will lapse upon vesting. The closing price of CHDN common stock on April 23, 2024, was used to determine the amount of restricted stock granted.
- 2. Restricted stock units do not have a conversion price or expiration date.
- 3. Includes restricted stock and restricted stock units granted for service as a director and dividends awarded for such units. The equivalent shares of common stock related to the vested restricted stock units will be transferred upon the reporting person's completion of service as a director.

Remarks:

Paula Chumbley, Attorney-in-Fact for Karole F. Lloyd

04/25/2024

** 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.