| July 29, 2010 | | | | | | |
|--|---|--|--|---|---|-------------|
| FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | OMB A | OMB APPROVAL | |
| Washington, D.C. 20549 | | | | OMB Number: | 3235-0104 | |
| INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES Expires: January 3 20 Estimated average burden hours per | | | | | | irs per |
| (Print or Type Responses) | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> CHAO WING T | 2. Date of Event Requiring Statement (Month/Day/Year) | | e and Ticker o AS SANDS | | | |
| (Last) (First) (Middle) | 07/27/2010 | 4. Relationshi Person(s) to I | p of Reporting ssuer | | Amendment, D l(Month/Day/Yea | - |
| 3355 LAS VEGAS BOULEVARD SOUTH | | (Check | all applicable) |) | | |
| (Street) | | X Director Officer (give title below | v) (specify below | r Filin | dividual or Join g(Check Applica Form filed by On | ble Line) |
| LAS VEGAS, NV 89109 | | | | | on Form filed by Mos rting Person | re than One |
| (City) (State) (Zip) | Table I - I | Non-Derivat | ive Securiti | ies Benefic | ially Owned | I |
| 1.Title of Security (Instr. 4) | 2. Amount of Beneficially (Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Ownership (Instr. 5) | f Indirect Benef | ïcial |
| Common Stock | 6,000 | | D | Â | | |

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

CHAO WING T

Earma 2

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

SEC 1473 (7-02)

| 1. Title of Derivative Security | 2. Date Exercisable and | 3. Title and Amount of | 4. | 5. | 6. Nature of Indirect |
|---------------------------------|-------------------------|------------------------|-------------|------------|-----------------------|
| (Instr. 4) | Expiration Date | Securities Underlying | Conversion | Ownership | Beneficial Ownership |
| | (Month/Day/Year) | Derivative Security | or Exercise | Form of | (Instr. 5) |
| | | (Instr. 4) | Price of | Derivative | |
| | | m: 1 | Derivative | Security: | |
| | Title | Security | Direct (D) | | |

Edgar Filing: CHAO WING T - Form 3

| Date | Expiration |
|-------------|------------|
| Exercisable | Date |

Amount or Number of Shares or Indirect (I) (Instr. 5)

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | |
|--|---------------|-----------|---------|-------|--|
| | Director | 10% Owner | Officer | Other | |
| CHAO WING T 3355 LAS VEGAS BOULEVARD SOUTH LAS VEGAS, NV 89109 | X | Â | Â | Â | |
| Signatures | | | | | |

| /s/ Wing T. Chao | 07/28/2010 |
|--|------------|
| <u>**</u> Signature of Reporting Person | Date |

Explanation of Responses:

- * 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).

Â

Remarks:

Exhibit 24.1: Power of Attorney

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.