## Edgar Filing: ISLE OF CAPRI CASINOS INC - Form 4

ISLE OF CAPRI CASINOS I Form 4 March 17, 2006	INC						
FORM 4	OMB APPROVAL						
UNITED	OMB Number:	3235-0287					
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <b>STATEN</b> <b>STATEN</b> <b>STATEN</b> <b>STATEN</b> <b>STATEN</b> <b>STATEN</b>	January 31, 2005 Estimated average burden hours per response 0.5						
See Instruction 1(b).	30(n) of the	Investment Company A	Act of 1940				
(Print or Type Responses)							
	- *						
1. Name and Address of Reporting SOLOMON ALLAN B	Person _ 2. Issu Symbo	ier Name <b>and</b> Ticker or Tra I	5. Relationship of Reporting Person(s) to Issuer				
	ISLE [ISLE	OF CAPRI CASINOS ]	(Check all applicable)				
(Last) (First) (A	(Month	of Earliest Transaction /Day/Year) /2006	Director 10% Owner X Officer (give title Other (specify below) below) EXECUTIVE VICE PRESIDENT				
(Street)	4. If Ar	nendment, Date Original	6	6. Individual or Joint/Group Filing(Check			
BILOXI, MS 39532	Filed(M	Ionth/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
(City) (State)	(Zip) Te			Person			
(City) (State)	(Zip) Ta	ble I - Non-Derivative Sec	curities Acqui	red, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)		3. 4. Securities A Transactionor Disposed o Code (Instr. 3, 4 and (Instr. 8)	of (D) d 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
0		O Code V Amount (D	D) Price	(Instr. 3 and 4)	(		
Common 03/16/2006 Stock	03/16/2006	S 11,535 D	\$ 30.4097	146,518	D		

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.

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

D Se	Title of verivative ecurity instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	<ol> <li>5.</li> <li>ctionNumber of</li> <li>Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)</li> </ol>	S	Date	7. Tit Amou Unde Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
					Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Add	dress	Relationships						
	Director	10% Owner	Officer	Other				
SOLOMON ALLAN B 1641 POPPS FERRY RO. BILOXI, MS 39532	AD		EXECUTIVE VICE PRESIDENT					
Signatures								
Allan B								
Solomon	03/17/2006							
<u>**</u> 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.