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ODONNELL CHRISTOPHER

Form 4

December 01, 2006

Common 11/29/2006

Stock,

December o	1, 2000										
FORM	UNITED		RITIES A		OMB AP OMB Number:	PROVAL 3235-0287					
Check this box Fxpires: January										•	
	Responses) Address of Reporting LL CHRISTOPHI		Symbol	er Name an OUS DAV OAVE]			I	5. Relationship of lessuer (Check	Reporting Pers		
((Month/	(Within/Day/ Lear)				Director 10% Owner _X Officer (give title Other (specify below) Exec. VP Operations			
MINNETO	(Street) NKA, MN 55343			endment, D onth/Day/Yea	_	ıl	- -	5. Individual or Joi Applicable Line) X_ Form filed by O Form filed by Mo Person	ne Reporting Per	rson	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Secui	rities Acqui	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code (Instr. 8)	Transaction Disposed of (D) Code (Instr. 3, 4 and 5)		(D) (5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, \$.01 par value	11/29/2006			Code V M	Amount 18,000	(D)	Price	18,000	D		
Common Stock, \$.01 par value	11/29/2006			M	6,000	A	\$ 2.375	24,000	D		

F

6,565 D \$16.16 17,435

D

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\$.01 par value							
Common Stock, \$.01 par value	11/29/2006	S	3,800	D	\$ 16.1031	13,635	D
Common Stock, \$.01 par value	11/29/2006	S	3,560	D	\$ 15.9941	10,075	D
Common Stock, \$.01 par value	11/29/2006	S	620	D	\$ 15.96	9,455	D
Common Stock, \$.01 par value	11/29/2006	S	20	D	\$ 16.22	9,435	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.

SEC 1474 (9-02)

 $\label{thm:convergence} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

1. Title of Derivative Security (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. Transactic Code (Instr. 8)	5. Number of ctionDerivative Securities 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Options (1)	\$ 2	11/29/2006		M		18,000	10/14/2003	10/14/2008	Common Stock, \$.01 par value	18,000
Employee Stock Options (1)	\$ 2.375	11/29/2006		M		6,000	03/23/2004	03/23/2009	Common Stock, \$.01 par value	6,000

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Employee Stock Options (1)	\$ 3.1875	05/23/2005	05/23/2010	Common Stock, \$.01 par value	16,000
Employee Stock Options (1)	\$ 3.9375	02/09/2001	02/09/2011	Common Stock, \$.01 part value	20,000
Employee Stock Options (1)	\$ 6.6	(2)	07/19/2012	Common Stock, \$.01 par value	30,000
Employee Stock Options (1)	\$ 6.15	(3)	02/18/2014	Common Stock, \$.01 par value	20,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
ODONNELL CHRISTOPHER							
C/O FAMOUS DAVE'S OF AMERICA			Exec. VP				
12701 WHITEWATER DRIVE, SUITE 200			Operations				
MINNETONKA, MN 55343							

Signatures

/s/ Christopher
O'Donnell

**Signature of Reporting
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).
- (1) Pursuant to Section 16b-3 (right to buy)
- (2) 6,000 shares vest on each of 7/19/03, 7/19/04, 7/19/05, 7/19/06 and 7/19/07.
- (3) 5,000 shares vest on each of 2/18/05, 2/18/06, 2/18/07 and 2/1/8/08.

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.

Reporting Owners 3