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ODONNELI Form 4	L CHRISTOPH	ER									
March 19, 20	013										
FORM	14					~			OMB AF	PROVAL	
	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check th if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	6. r Filed pu ns Section 17	 box STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section aute 20(b) of the Investment Company Act of 1940 								Expires: January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> ODONNELL CHRISTOPHER			2. Issuer Name and Ticker or Trading Symbol FAMOUS DAVES OF AMERICA INC [DAVE]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) C/O FAMOUS DAVE'S OF AMERICA, 12701 WHITEWATER DRIVE, SUITE 200			3. Date of Earliest Transaction (Month/Day/Year) 03/15/2013					_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) President and COO			
	(Street)	endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
MINNETO	NKA, MN 5534	-3						Form filed by M Person			
(City)	(State)	(Zip)	Tabl	le I - Non-I	Derivative	Secur	ities Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)		ansaction Date 2A. Deemed th/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price			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	03/15/2013			A	50,476	. ,	\$ 0	151,022	D		
Common Stock, \$.01 par value	03/15/2013			F	24,817	D	\$ 10.73	126,205	D		

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

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information contained in this form are not
required to respond unless the formSEC 1474
(9-02)

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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)

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. Transacti Code (Instr. 8)	· · ·		Date	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secu (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Options (1)	\$ 6.15					(2)	02/18/2014	Common Stock, \$.01 par value	20,000	
Restricted Stock Units	<u>(3)</u>					(4)	(4)	Common Stock	50,000	

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
ODONNELL CHRISTOPHER C/O FAMOUS DAVE'S OF AMERICA 12701 WHITEWATER DRIVE, SUITE 200 MINNETONKA, MN 55343	х		President and COO			

Signatures

/s/ Christopher 03/19/2013 O'Donnell

<u>**</u>Signature of Reporting Person

Date

orting

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) 5,000 shares vested on each of 2/18/05, 2/18/06, 2/18/07 and 2/1/8/08.

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- (3) Each restricted stock unit represents a contingent right to receive one share of the Company's Common Stock.
- (4) The restricted stock units vest in three equal annual installments beginning on 9/11/2011. Vested shares will be delivered to the Reporting Person upon the termination date of his employment with the Company.

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.