Edgar Filing: RARE HOSPITALITY INTERNATIONAL INC - Form 4

Form 4	SPITALITY INTE	ERNATIO	NAL IN	NC						
								N OMB Number: Expires: Estimated burden hou response.	Number:3235-0287Expires:January 31, 2005Estimated average burden hours per response0.5	
(Print or Type 1. Name and CHAPMA	Address of Reporting	Person <u>*</u>	Symbol RARE	er Name and HOSPITA RNATION	ALITY	C .	5. Relationship Issuer (Ch	of Reporting Per eck all applicabl		
(Last) 8215 ROS ROAD, BU	3. Date of Earliest Transaction (Month/Day/Year) 02/08/2005			X_ Director 10% Owner Officer (give title Other (specify below) below)						
ATLANT	4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting						
		(Zip)					Person			
(City)	(State)	(Zip)		ole I - Non-l			cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D)	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)	
Reminder: Re	eport on a separate line				Perso inforr requi displa numb	ons who res nation cont red to resp ays a curre eer.	or indirectly. spond to the collect tained in this form ond unless the fo ntly valid OMB co Beneficially Owne	n are not orm ontrol	SEC 1474 (9-02)	
	1 80					convertible		u		

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amoun
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securit

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Security (Instr. 3)	or Exercise Price of Derivative Security	ce of (Month/Day/Year) rivative		Code (Instr. 8)	Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ear)	(Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Share
Non-Qualified Stock Option (right to buy)	\$ 31.72	02/08/2005		А	5,625	08/08/2005	02/08/2015	Common Stock	5,6

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
CHAPMAN DON L 8215 ROSWELL ROAD BUILDING 600 ATLANTA, GA 30350	Х						
Signatures							
Don L. Chapman, by Joia M. Jo Attorney-in-Fact	ohnson,			02/10/2005			
<u>**</u> Signature of Reporting	g 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.