

Edgar Filing: ABRAHAMSON JAMES R - Form 4

ABRAHAMSON JAMES R  
Form 4  
January 06, 2003

-----  
OMB APPROVAL  
-----  
OMB Number 3235-0287  
Expires: January 31, 2005  
Estimated average burden  
hours per response ..... 0.5  
-----

UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549

FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 30(h) of the Investment Company Act of 1940

Check this box if no longer subject to Section 16. Form 4 or Form 5  
obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person\*

ABRAHAMSON, JAMES R.

(Last)

(First)

(Middle)

c/o THE MARCUS CORPORATION  
250 EAST WISCONSIN AVENUE, SUITE 1700

(Street)

MILWAUKEE, WI 53202

(City)

(State)

(Zip)

2. Issuer Name and Ticker or Trading Symbol

THE MARCUS CORPORATION (NYSE: MCS)

3. IRS Identification Number of Reporting Person, if an Entity (Voluntary)

4. Statement for Month/Day/Year

January 2, 2003

5. If Amendment, Date of Original (Month/Day/Year)

=====

**Edgar Filing: ABRAHAMSON JAMES R - Form 4**

6. Relationship of Reporting Person(s) to Issuer  
(Check all applicable)

- Director  10% Owner  
 Officer (give title below)  Other (specify below)

President and Chief Operating Officer of Baymond Inns & Suites

7. Individual or Joint/Group Filing (Check applicable line)

- Form filed by one Reporting Person  
 Form filed by more than one Reporting Person

Table I -- Non-Derivative Securities Acquired, Disposed of,  
or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/ Day/ Year)	2A. Deemed Execution Date, if any (Month/ Day/ Year)	3. Transaction Code (Instr. 8) ----- Code V	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Price
				Amount	(A) or (D)	
Common Stock						
Common Stock	1/2/03		M	5,900	A	\$10.3125
Common Stock	1/2/03		S	5,900	D	\$14.53

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly by the reporting person.  
 \* If the Form is filed by more than one Reporting Person, see Instruction 4(b)(v).

Persons who respond to the collection of information contained in this form are not required to provide the information unless the form displays a currently valid OMB control number.

FORM 4 (continued)

Edgar Filing: ABRAHAMSON JAMES R - Form 4

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. Conver- sion or Exer- cise Price of Deriv- ative Secur- ity	3. Trans- action Date (Month/ Day/ Year)	3A. Deemed Execu- tion Date, if any (Month/ Day/ Year)	4. Trans- action Code (Instr. 8) ----- Code V	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) ----- (A) (D)	6. Date Exercisable and Expiration Date (Month/Day/Year) ----- Date Expira- tion Date	7. Title and Amount of Underlying Securities (Instr. 3 and 4) ----- Amount or Number of Shares
Employee Stock Option Grant Date: 4/24/00	\$10.3125	1/2/03		M	5,900	(2) 4/24/10	* 5,900
Employee Stock Option Grant Date: 6/28/00	\$11.4375					(2) 6/28/10	* 50,000
Employee Stock Option Grant Date: 7/12/01	\$14.05					(2) 7/12/11	* 50,000
Employee Stock Option Grant Date: 7/11/02	\$15.55					(2) 7/11/12	* 40,000

Explanation of Responses:

\* Common Stock

- (1) Balance reflects the most current data available with regard to holdings in the 401(k) P
- (2) Options vest and become exercisable as follows: 40% after 2nd anniversary of the date of 80% after 4th anniversary; and 100% after 5 years.

JAMES R. ABRAHAMSON

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations.

/s/ Ralph J. Gu...

Edgar Filing: ABRAHAMSON JAMES R - Form 4

See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

-----  
\*\* Signature of  
By Ralph J. Gun

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  
form displays a currently valid OMB Number.