## Edgar Filing: BAILEY GEOFFREY R - Form 4

BAILEY GE Form 4										
July 25, 2018	Л	STATES					E COMMISSIO		PPROVAL 3235-0287	
Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	er <b>STATEN</b> 5. Filed pur <sup>s</sup> Section 17(	Washington, D.C. 20549 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 30(h) of the Investment Company Act of 1940								
(Print or Type R	esponses)									
1. Name and Address of Reporting Person <u>*</u> BAILEY GEOFFREY R			2. Issuer Name <b>and</b> Ticker or Trading Symbol Good Times Restaurants Inc. [GTIM]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 601 CORPORATE CIRCLE			3. Date of Earliest Transaction (Month/Day/Year) 07/23/2018			Director 10% Owner Officer (give title Other (specifybelow)below)				
(Street) GOLDEN, CO 80401			4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
(City)	(State)	(Zip)	Tab	la I Nan I	Doministry	Soowition /	Person	of on Donoficio	lly Owned	
1.Title of	2. Transaction Date	-	ed Date, if	3. Transactic Code	4. Securi nAcquirec Disposec (Instr. 3,	ties I (A) or I of (D) 4 and 5) (A) or	Acquired, Disposed 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	
Reminder: Repo	ort on a separate line	for each cl	ass of sec	urities bene	Perse infor requi	ons who re mation con red to resp ays a curre	or indirectly. spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amou
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securi
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	Í	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Nun of Shai
Non Qualified Stock Option	\$ 7.79	07/23/2018 <u>(1)</u>		D			7,060	03/23/2016 <u>(2)</u>	03/13/2025	Common Stock	7,0
Non Qualified Stock Option	\$ 7.79	07/23/2018 <u>(1)</u>		А		2,715		07/23/2018	07/23/2028	Common Stock	2,7

## **Reporting Owners**

Reporting Owner Name / Addre	SS	Relationships						
1 8	Director	10% Owner	Officer	Other				
BAILEY GEOFFREY R 601 CORPORATE CIRCLE GOLDEN, CO 80401	2							
Signatures								
Geoffrey R. Bailey	07/25/2018							

\*\*Signature of Reporting Person

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

On July 23, 2018, the issuer canceled options of the issuer's common stock granted to the reporting person on March 13, 2015 pursuant to (1) the issuer's option exchange program. In exchange, the reporting person received a replacement option, having an exercise price of \$4.25 per share. The replacement options are fully vested upon issue.

(2) The Non-Qualified Stock Options vested in three equal annual installments with the first installment vesting March 13, 2016.

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.