

FAMOUS DAVES OF AMERICA INC
 Form 4
 March 29, 2005

FORM 4

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

OMB APPROVAL

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

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 Responses)

1. Name and Address of Reporting Person *
 ANDERSON DAVID W

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)
 7016 ANTRIM ROAD
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)
 08/31/2004

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

EDINA, MN 55439
 (City) (State) (Zip)

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 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)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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)
			Code	V	Amount	(A) or (D)	Price
Common Stock	08/31/2004		G		14,800	D	\$ 0
Common Stock	01/03/2005		S		1,000	D	\$ 12.52
Common Stock	01/04/2005		S		1,000	D	\$ 12.58
Common Stock	01/05/2005		S		1,000	D	\$ 11.17
Common Stock	01/06/2005		S		1,000	D	\$ 11.55

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Common Stock	01/07/2005	S	1,000	D	\$ 11.36	1,087,900	D	
Common Stock	01/10/2005	S	1,000	D	\$ 11.07	1,086,900	D	
Common Stock	01/18/2005	S	1,000	D	\$ 10.92	1,085,900	D	
Common Stock	01/19/2005	S	2,000	D	\$ 11.07	1,083,900	D	
Common Stock	01/20/2005	S	3,000	D	\$ 10.96	1,080,900	D	
Common Stock	01/24/2005	S	4,000	D	\$ 12.19	1,076,900	D	
Common Stock	01/25/2005	S	4,000	D	\$ 12.06	1,072,900	D	
Common Stock	01/26/2005	S	6,000	D	\$ 12.09	1,066,900	D	
Common Stock	01/27/2005	S	5,700	D	\$ 11.55	1,061,200	D	
Common Stock						69,600	I	see footnote (1)

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

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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. Transaction Code (Instr. 8)	5. Number of Derivative Securities 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)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Report Transaction (Instr. 6)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
ANDERSON DAVID W 7016 ANTRIM ROAD EDINA, MN 55439		X		

Signatures

/s/ David W.
Anderson

03/24/2005

__Signature of
Reporting 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).
- (1) Represents shares held by Grand Pines Resorts, Inc., a corporation wholly owned by Mr. Anderson. 6,500 of these shares are subject to options (obligations to sell) granted to employees of Grand Pines Resorts, Inc.

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.