## Edgar Filing: DAMELIO PETER J - Form 4

DAMELIO	PETER J											
Form 4												
January 05,	2006											
FORM	Л 4					~~~ .		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		PPROVAL		
	UNITEL	O STATES		RITIES A Ashington			NGE	COMMISSIO	N OMB Number:	3235-0287		
Check t	nger								Expires:	January 31,		
	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									Estimated average		
Section	16.			SECU	RITIES					burden hours per		
Form 4 Form 5			a .•						response	. 0.5		
obligati	-							nge Act of 1934,				
may cor	ntinue. Section 17			•	•	· ·	•	of 1935 or Secti	on			
See Inst	ruction	30(n)	of the f	nvestment	Compar	iy Ac		940				
1(b).												
(Print or Type	Responses)											
	Address of Reportin	g Person <sup>*</sup>	2. Issu	er Name <b>an</b>	<b>d</b> Ticker or	Tradi	ng		of Reporting Per	Reporting Person(s) to		
DAMELIO PETER J Sy								Issuer				
			CHEESECAKE FACTORY INCORPORATED [CAKE]					(Check all applicable)				
			INCO	RPORATI	ED [CAK	E						
(Last)	(First)	(Middle)		of Earliest T	ransaction			Director		6 Owner		
				Day/Year)				XOfficer (give titleOther (specify below) below)				
20901 MA	LIDU HILLS KU	JAD	01/04/2	2006				Pres	ident (Subsidiar	y)		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
			Filed(Mo	onth/Day/Yea	r)			Applicable Line)	· One Deporting D			
CALARAS	SAS HILLS, CA	01201						_X_ Form filed by Form filed by	More than One R			
CALADA	SAS IIILLS, CA	91501						Person				
(City)	(State)	(Zip)	Tal	ole I - Non-l	Derivative	Secur	rities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	e 2A. Deem	ied	3.	4. Securit	ies		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year) Execution		Date, if	Transactio Code	nAcquired (A) or			Securities	Form: Direct	Indirect		
(Instr. 3)		•	any (Month/Day/Year)		Disposed of (D) (Instr. 3, 4 and 4			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(WORLD	ay/1cal)	(111501.0)	(1130. 5,	t and .	5)	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D)	Price	(msu. 5 and 4)				
Reminder: Re	port on a separate li	ne for each cl	lass of sec	curities bene	ficially ow	ned di	rectly o	or indirectly.				

Persons who respond to the collection of information contained in this form are not required to respond unless the form 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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	]
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)	Acquired or Dispose (D) (Instr. 3, 4 and 5)	ed of				
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to Purchase (Right to Buy)	\$ 36.87	01/04/2006		A		40,000		<u>(1)</u>	01/04/2016	Common Stock	40,000
Repor	ting Ow	ners									

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
DAMELIO PETER J 26901 MALIBU HILLS ROAD CALABASAS HILLS, CA 91301			President (Subsidiary)						
Signatures									
Jane Vallaire, Attorney-in-Fact	01/04/2								
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) The option vests in five equal annual installments beginning 1/04/07.

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.