GOOD TIMES RESTAURANTS INC

Form 4

November 09, 2016

Check this box

if no longer

subject to

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

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Estimated average burden hours per

OMB APPROVAL

response...

Section 16. Form 4 or Form 5 obligations may continue.

See Instruction

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

SECURITIES

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **DELTA PARTNERS LP**

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

below)

Symbol

GOOD TIMES RESTAURANTS

(Check all applicable)

INC [gtim]

(Last) (First) (Middle)

(Street)

3. Date of Earliest Transaction

Director 10% Owner Other (specify Officer (give title

(Month/Day/Year) 11/07/2016

ONE INTERNATIONAL PLACE, SUITE 2401

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

Form filed by One Reporting Person _X_ Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

BOSTON, MA 02110

(City) (State) (Zip)

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

Price

2.8981

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of 6. Securities Ownership Beneficially Form: Owned Direct (D) or Indirect Following

Reported (I) Transaction(s)

(Instr. 4) (Instr. 3 and 4)

Good Times

Inc

Restaurants 11/07/2016 Code V Amount (D) P 8,711

(A)

1,856,429

Footnote $I^{(1)}$ 1 (1)

7. Nature of

Indirect

Beneficial

Ownership

(Instr. 4)

(9-02)

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

(Month/Day/Year)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactio Code (Instr. 8)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D)			Amou Under Secur	tle and unt of erlying rities r. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(Instr. 3, 4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
copyring of the rate of the control	Director	10% Owner	Officer	Other		
DELTA PARTNERS LP ONE INTERNATIONAL PLACE SUITE 2401 BOSTON, MA 02110		X				
JOBSON CHARLES E ONE INTERNATIONAL PLACE SUITE 2401 BOSTON, MA 02110		X				
Delta Partners GP, LLC ONE INTERNATIONAL PLACE, SUITE 2401 BOSTON, MA 02110		X				
Ciamatuwaa						

Signatures

Charles Jobson 11/09/2016

**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).

Reporting person, Delta Partners, LP, is the investment manager for two private funds and is deemed to have beneficial ownership. The two entities are the actual owners of the issuer. Delta Partners GP, LLC is the general partner of Delta Partners, LP. Charles Jobson is the owner of Delta Partners, LP and managing member of Delta Partners GP, LLC, and can be deemed to have investment discretion. All reporting persons disclaim beneficial ownership of the shares reported herein except to the extent of their pecuniary interest.

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.

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