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| ESCALADE INC Form 4 Sovember 24, 2008 OMB >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>> | | | | | | | |
|--|------------|---|---|--|--|---|---|
| 1(b). (Print or Type Re | esponses) | | | | | | |
| 1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Symbol GRIFFIN ROBERT E Symbol ESCALADE INC [ESCA | | | - | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) 817 MAXWE | | iddle) 3. Da (Mor | 3. Date of Earliest Transaction (Month/Day/Year)X_ Director 11/21/2008X_ Officer below) | | | | ble) 10% Owner Other (specify |
| | | | mendment, Date Original 6. Individual or Aonth/Day/Year) Applicable Line) _X_ Form filed by Person | | | One Reporting | ; Person |
| (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | |
| | | 2A. Deemed Execution Date, any (Month/Day/Ye | if Transaction(A) or D Code (D) | (A) or | Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock 1 | 11/21/2008 | 11/21/2008 | P 2,646 | A \$ 0.86 | 478,658 | D | |
| Common Stock | | | | | 86,462 <u>(1)</u> | I | Adult Children |
| Common Stock | | | | | 959,796 | I | Family Limited Partnership |
| Common Stock | | | | | 1,800,000 | I | Family Limited Liability Corporation |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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. | 6. Date Exerc | cisable and | 7. Titl | e and | 8. Price of | 9. Nu |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------|-------------|---------|----------|-------------|--------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transacti | onNumber | Expiration Da | ate | Amou | nt of | Derivative | Deriv |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Under | lying | Security | Secu |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative | e | | Securi | ities | (Instr. 5) | Bene |
| | Derivative | | | | Securities | | | (Instr. | 3 and 4) | | Owne |
| | Security | | | | Acquired | | | | | | Follo |
| | | | | | (A) or | | | | | | Repo |
| | | | | | Disposed | | | | | | Trans |
| | | | | | of (D) | | | | | | (Instr |
| | | | | | (Instr. 3, | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | | | | | Amount | | |
| | | | | | | | | | or | | |
| | | | | | Date | Expiration | Title | Number | | | |
| | | | | | | Exercisable | Date | inte | of | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|----------|-------|--|--|
| reporting officer tame / rear cos | Director | 10% Owner | Officer | Other | | |
| GRIFFIN ROBERT E 817 MAXWELL AVE EVANSVILLE, IN 47717 | Х | Х | Chairman | | | |
| Signatures | | | | | | |

| /s/ Robert E. Griffin | 11/24/2008 | | | |
|--|------------|--|--|--|
| <u>**</u> 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) Mr. Griffin disclaims beneficial interest in shares held by his adult children.

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.