

GOTTSCHALKS INC
Form 3
July 20, 2006

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF 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 *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Wiser Robert		(Month/Day/Year)	GOTTSCHALKS INC [got]	
(Last)	(First)	(Middle)	06/28/2006	
C/O GOTTSCHALKS INC., 7 RIVER PARK PLACE EAST			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
FRESNO, CA 93720			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
			(give title below)	(specify below)
			SR.VP/General Merchdisse Mgr.	6. Individual or Joint/Group Filing(Check Applicable Line)
				<input checked="" type="checkbox"/> Form filed by One Reporting Person
				<input type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock ⁽¹⁾	13,640	D	

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

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) Title	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Amount or Number of Shares	or Indirect (I) (Instr. 5)
Option to Purchase Common Stock	Â (2)	Â (3)	Stock Option (4)	\$ (5) D Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Wiser Robert C/O GOTTSCHALKS INC. 7 RIVER PARK PLACE EAST FRESNO, CA 93720	Â	Â	Â SR.VP/General Merchandise Mgr.	Â

Signatures

/s/ Robert Wiser 07/20/2006
 __Signature of Date
 Reporting Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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 shares were acquired within the issuer's 401(k) Plan in the amount of 9,677 shares. Shares were also acquired within the issuer's Employee Stock Purchase Plan in the amount of 3,963 shares for a total amount of securities owned of 13,640 shares.
- (2) Options were granted on 11/23/1998, 6/14/1999, 3/31/2000, 8/3/2001, 5/3/2002, 5/3/2003, 4/30/2004 and 5/27/2005. Options become vested and exercisable in increments of 25% on each of the first, second, third and fourth anniversaries of the option date, and are exercisable over the next ten years from date of issue.
- (3) All options expire ten years from the date of issue.
- (4) Options granted from grant date of 11/23/1998 through grant date 5/27/2005 amount to a total of 42,500 shares.
- (5) Options granted from 11/23/1998 through 5/27/2005 at option prices ranging from \$1.13 to \$10.48 per share.

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.