

Edgar Filing: TRUMP HOTELS & CASINO RESORTS INC - Form 5

| 1. Title of Security (Instr. 3) | 2. Trans- action Date (Month/ Day/ Year) | 3. Trans- action Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficia Owned at End of Issuer's Fiscal Ye (Instr. 3) |
|------------------------------------|---|---|---|--|
| | | Code | Amount (A) or (D) | Price |

* If the form is filed by more than one reporting person, see instruction 4(b) (v).

Form 5 (continued)

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. Conver- sion or Exercise Price of Deriv- ative Security | 3. Trans- action Date (Month/ Day/ Year) | 4. Transac- tion Code (Instr. 8) |
|---|--|---|--|
| | | | Code |

| | | | |
|-----------------------------|--------|---------|---|
| Stock Option (right to buy) | \$2.20 | 6/19/01 | A |
|-----------------------------|--------|---------|---|

| 6. Date Exer- cisable and Expiration | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Deriv- | 9. Number of Deriv- ative | 10 |
|--|---|--------------------------|---------------------------------|----|
|--|---|--------------------------|---------------------------------|----|

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| Date (Month/Day/ Year) | Expira- tion Date | Title | Amount or Number of Shares | ative Secur- ity (Instr. 5) | Secur- ities Bene- ficially Owned at End of Year (Instr. 4) |
|------------------------------|-------------------------|-----------------|----------------------------------|--------------------------------------|--|
| (1) | 6/18/11 | Common Stock | 500,000 | | 500,000 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Explanation of Responses:

(1) Non-Qualified Stock Option vests in three equal installments, one-third on the date of grant and on each of the first two anniversary dates of the date of grant.

| | |
|---------------------------------|----------|
| /s/ DONALD J. TRUMP | 2/4/2002 |
| ----- | ----- |
| **Signature of Reporting Person | Date |
| DONALD J. TRUMP | |

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure.

Potential persons who 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.