MAGUSIAK MICHAEL H

Form 4

November 01, 2004

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FORM	14 UNITED	STATES		RITIES A			NGE CO	OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287	
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if no lon		MENT OF	CHAN	NGES IN	RENEE	TCTA	AL OWN	FRSHIP OF	Expires:	2005	
subject to Section 16. Form 4 or			F CHANGES IN BENEFICIAL OWN SECURITIES					EKSIII OF	Estimated average burden hours per response 0.		
Form 5	rsuant to S	ection	16(a) of t	he Securi	ties I	Exchange	Act of 1934,	тоорогности	0.0		
obligation may con <i>See</i> Instraction 1(b).	Section 170	(a) of the P	ublic U	Itility Ho	lding Co	npan	_	1935 or Section			
(Print or Type	Responses)										
1. Name and Address of Reporting Person * MAGUSIAK MICHAEL H			2. Issuer Name and Ticker or Trading Symbol CEC ENTERTAINMENT INC]	5. Relationship of Reporting Person(s) to Issuer			
			[CEC]	NILKIF	AIINIVILIN	1 111	C	(Check	all applicable)	
(Last)	(First) (of Earliest 7	Γransaction			_X_ Director		Owner	
4441 W. AIRPORT FREEWAY			(Month/Day/Year) 10/28/2004					_X_ Officer (give title Other (specify below) President			
	(Street)		4. If Am	endment, D	Date Origina	al	(6. Individual or Joi	nt/Group Filin	g(Check	
			Filed(Mo	onth/Day/Yea	ar)			Applicable Line) _X_ Form filed by Or	ne Reporting Per	rson	
IRVING, T	X 75062						-	Form filed by Mo			
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if Transaction Disposed of (D) Code (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount		Price	(Instr. 3 and 4)			
Common Stock, Par Value \$.10								120,733	D		
Common Stock, Par Value \$.10	10/28/2004			D	28,150	D	\$ 38.2531	92,583	D		
Common Stock, Par Value \$.10	11/01/2004			D	29,850	D	\$ 38.3266	62,733	D		

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

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SEC 1474 (9-02)

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. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3 4, and 5	Expiration D (Month/Day ve es d	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option	\$ 11.6673					<u>(1)</u>	01/08/2006	Common Stock	112,500	
Employee Stock Option	\$ 15.5					(2)	03/07/2007	Common Stock	75,000	
Employee Stock Option	\$ 22.6667					(3)	01/05/2008	Common Stock	225,000	
Employee Stock Option	\$ 29					<u>(4)</u>	01/03/2009	Common Stock	150,000	
Employee Stock Option	\$ 19.9933					<u>(5)</u>	01/13/2010	Common Stock	375,000	

Reporting Owners

Reporting Owner Name / Address	Keiationsnips						
	Director	10% Owner	Officer	Other			
MAGUSIAK MICHAEL H 4441 W. AIRPORT FREEWAY IRVING, TX 75062	X		President				

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Signatures

Michael H.

Magusiak 11/01/2004

**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) Vesting Schedule: 30% after 01/08/01; 65% after 01/08/02; and 100% after 01/08/03.
- (2) Vesting Schedule: 100% after 12/05/03.
- (3) Vesting Schedule: 33% after 01/05/03; 66% after 01/05/04; and 100% after 01/05/05.
- (4) Vesting Schedule: 33% after 01/03/04; 66% after 01/03/05; and 100% after 12/05/05.
- (5) Vesting Schedule: 33% after 01/13/04; 66% after 01/13/05; and 100% after 01/13/06.

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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