## SECURITIES AND EXCHANGE COMMISSION

## FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: 2004-08-12 | Period of Report: 2004-08-11 SEC Accession No. 0001055501-04-000004

(HTML Version on secdatabase.com)

### **ISSUER**

### HANOVER CAPITAL MORTGAGE HOLDINGS INC

CIK:1040719| IRS No.: 133950486 | State of Incorp.:MD | Fiscal Year End: 1231 SIC: 6798 Real estate investment trusts

Mailing Address 379 THORNALL STREET 2ND FLOOR EDISON NJ 08837

**Business Address** 379 THORNALL STREET 2ND FLOOR EDISON NJ 08837 732-548-0101

## **REPORTING OWNER**

#### **BURCHETT JOHN A**

CIK:1055501

Type: 4 | Act: 34 | File No.: 001-13417 | Film No.: 04969096

Mailing Address HANOVER CAPITAL 90 WEST ST STE 1508 NEW YORK NY 10006

**Business Address** HANOVER CAPITAL MORTGAGE HOLDINGS INC MORTGAGE HOLDINGS INC 90 WEST ST STE 1508 NEW YORK NY 10006 2127325086

## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
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Estimated average burden									
hours per response	0.5								

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address BURCHETT Jo	. 0	n <u>*</u>	2. Issuer Name and Ticker or Trading Symbol HANOVER CAPITAL MORTGAGE HOLDINGS INC [hcm]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% OwnerX Officer (give title Other (specify below					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/11/2004	below)  CEO and President					
HANOVER CAPI	ITAL MORTGAC	GE HOLDINGS							
INC, 379 THORN	IALL STREET								
EDISON, NJ 0883	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing (Check applicable line)  _X Form Filed by One Reporting Person Form Filed by More than One Reporting Person					
(City)	(State)	(Zip)		1 offir riled by More than One Reporting Person					

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

1.Title of Security (Instr. 3)	2. Transaction Date (Month/ Day/Year)		Code (Instr.		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	
Common Stock (1)	08/11/2004		<u>J</u>		5,393	A	\$ 0	563,418	D	

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	1	3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Transac Code (Instr. 8	ction	5. Num of Deriv Secu Acqu (A) o Dispo of (D (Instr	ber vative prities priced r posed )	6. Date Exerci Expiration Dat Day/Year)	isable and			8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	4, an	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Options	\$15.75							07/01/2002	06/30/2007	Common Stock	24,270		24,270	D	
Options	\$15							09/19/2001	09/18/2007	Common Stock	89,467		89,467	D	

#### **Explanation of Responses:**

1. Grant of Shares pursuant to Hanover Capital Holdings, Inc. Bonus Incentive Compensation Plan dated 9/19/97.

#### **Signatures**

John A. Burchett

08/12/2004

\*\* Signature of Reporting Person

Date

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

- \* 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).

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

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 Number.