| GRABER DON R<br>Form 4<br>December 11, 2002  |               |  |  |                   |  |  |  |
|--|---------------|--|--|-------------------|--|--|--|
| FORM 4   | UNITED STATES | S SECURITIES AND E                       | XCHANGE COMMISSION   | OMB A             |  |  |  |
|  |               | Washington, D.C.                         | Washington, D.C. 20549   |                   |  |  |  |
|  |               |  |  | Expires:          |  |  |  |
|  | STATEMENT     | OF CHANGES IN BEN                        | NEFICIAL OWNERSHIP   | Estimate hours pe |  |  |  |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b). | •             | of the Public Util                       | Exchange Act of 1934, Section 17(a) lity the Investment Company Act of 194             |                   |  |  |  |
| (Print or Type Responses)  1. Name and Address of I  |               | 2. Issuer Name and T or Trading Symbol   | Ficker 6. Relationship of Reportin Person(s) to Issuer                                 | g                 |  |  |  |
| Graber   |               | Huffy Corporation (H                     | (Check all applicable)   |                   |  |  |  |
| Don  |               |  | X Director   |                   |  |  |  |
| R.   |               |  | Director   |                   |  |  |  |
| (Last)   |               | 3. I.R.S. Identification                 | 410% Owner Statement   |                   |  |  |  |
| (First)  |               | Number of Reporting Person, if an entity | 37 000 / 1 11 1  | pelow)            |  |  |  |
| (Middle)   |               | (Voluntary)                              | Other (specify belo  | ow)               |  |  |  |
| 225 Byers Road   |               |  | 12/9/2002<br><u>CEO, President and Chairm</u><br><u>of the Board</u>                   | <u>an</u>         |  |  |  |
|  | Street)       |  | 5. If AImelmedinedtaDateJofnOfigina Month/Day/Year XForm filed by One Reporting Person |                   |  |  |  |
|  |               |  | Form filed by Mo   | re than One       |  |  |  |

| N /I 1 | omichiira |
|--------|-----------|
| IVII   | amisburg  |
|        |           |

OH

45342

(City)

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

(State)

(Zip)

| 1. Title of Security | 2. Transaction | 2A. Deemed   | 3. Tran   | sact | i <b>4</b> nSecurit | ies A  | cquire  | d5(AA)m | 6DAYP6Se         | stripi | t7esNature of |
|----------------------|----------------|--------------|-----------|------|---------------------|--------|---------|---------|------------------|--------|---------------|
|                      | Date (Month/   | Execution    | Code      |      | of (D) (In          | str. 3 | , 4 and | B)enefi | i Eicarlihy: Obi | næct   | Indirect      |
| (Inst. 3)            |                | Date, if any | (Instr. 8 | 3)   |                     |        |         | Follov  | valence galiv    | rted   | Beneficial    |
|                      | Day/Year)      | (Month/Day/  |           |      |                     |        |         | Transa  | abtitins(t)      | (J     | Ownership     |
|                      |                |              |           |      |                     |        |         |         | (Instr. 4)       |        | (Instr. 4)    |
|                      |                | Year)        |           |      |                     |        |         | (Instr. | 3 and            |        |               |
|                      |                |              |           |      |                     |        |         | 4)      |                  |        |               |
|                      |                |              | Code      | V    | Amount              | (A)    | Price   |         |                  |        |               |
|                      |                |              |           |      |                     | or     |         |         |                  |        |               |
|                      |                |              |           |      |                     | (D)    |         |         |                  |        |               |
| Common Stock         | 12/9/2002      |              | A         |      | 23,845              | A      |         |         |                  |        |               |
| Common Stock         | 12/9/2002      |              | F         |      | 8,035               | D      | \$7.20  | 70,026  | D                |        |               |
|                      |                |              |           |      |                     |        |         | 3,100   | I                |        | By Spouse     |

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

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 control number.

TABLE II - Derivative Securities Acquired, Disposed of, or Beneficially Owner

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

| 1. Title of | 2. Conversion | 3. Trans-action | 3A. Deemed   | 4.       | 5. Numb <b>6</b> r <b>D</b> fate Exercisable   | 7. Title and An  | nooulPartice of    |
|-------------|---------------|-----------------|--------------|----------|--|------------------|--------------------|
| Derivative  | or Exercise   | Date (Month/    | Execution    | Trans-ac | committee the committee of the committee | of Underlying    | Derivative         |
| Security    | Price of      |                 | Date, if any | Code     | Securitie(Month/Day/Yr)  | Securities (Inst | t <b>S</b> &curity |
| (Instr. 3)  | Derivative    | Day/Yr)         | (Month/      | (Instr.  | Acquired (A)   | and 4)           | (Instr. 5)         |
|             |               |                 |              |          |  |                  |                    |

<sup>\*</sup>If the form is filed by more than one reporting person, see Instruction 4(b)(v).

| Security                                  | Day/Yr)         | 8)         | or Dispo<br>of (D) (1<br>3,<br>4 and 5) | Instr.               |                           |  |
|---|-----------------|------------|---|----------------------|---------------------------|--|
|   |                 | Code V     | (A) (D)                                 | Date<br>Exer-cisable | Expir-ation Title<br>Date | Amount<br>or<br>Number<br>of<br>Shares |
|   |                 |            |   |                      |                           |  |
| Explanation of Responses:                 |                 |            |   |                      |                           |  |
|   |                 |            |   |                      |                           |  |
| **Intentional misstatements or omissions  | e of facts cons | titute Fed | eral Crim                               | sinal Violation      | a c                       |  |
| /s/Don R. Graber                          | s of facts cons | inuic rea  | Ciai Ciiii                              | iiiiai vioiatioi     | 15                        |  |
| 12/11/02                                  |                 |            |   |                      |                           |  |
| See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a   | 1)              |            |   |                      |                           |  |
| **Signature of Reporting Person           | ,               |            |   |                      |                           |  |
| Date                                      |                 |            |   |                      |                           |  |
| Don R. Graber                             |                 |            |   |                      |                           |  |
| Note: File three copies of this Form, one | of which mus    | st be man  | ually sign                              | ned. If space i      | s insufficient,           |  |
| 225 Byers Road                            |                 |            |   |                      |                           |  |
| see Instruction 6 for procedure.          |                 |            |   |                      |                           |  |

Miamisburg, OH 45342

Huffy Corporation (HUF)

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