FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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MRKONIC GEORGE R JR			2. Date of Event Requiring Statement Month/Day/Year) 09/24/2003  3. Issuer Name and Ticker or Trading Symbol BRINKER INTERNATIONAL INC [ EAT ]								
(Last) (First) (Middle) 100 PHOENIX DRIVE		(Middle)			Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) ANN ARBOR	MI	48108				Officer (give title below)	Other (spe below)			cable Line) Form filed by	/Group Filing (Check  y One Reporting Person y More than One erson
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)				4. Nature of Indirect Beneficial Ownership (Instr. 5)		
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)		d 3. Title and Amount of Secur Underlying Derivative Securi			4. Convers	sion cise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	n Title	•	Amount or Number of Shares	Price of Derivati Security	ve	Direct (D) or Indirect (I) (Instr. 5)			

**Explanation of Responses:** 

No securities are beneficially owned.

Jay L. Tobin, Attorney-in-Fact for George R. Mrkonic

09/24/2003

\*\* Signature of Reporting Person Date

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

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