Edgar Filing: Ruths Hospitality Group, Inc. - Form 4

| Ruths Hospit Form 4 March 13, 20 | ality Group, Inc. | | | | | | | | | | |
|---|--|--|-----------------------------------|---|------------------------|--------------------|------------------|--|--|---|--|
| OMB APPRO OMB APPRO | | | | | | | | | | PPROVAL | |
| | UNITED | Washington, D.C. 20549 | | | | | | | OMB Number: | urs per | |
| Check thi if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b). | er STATEN 6. Filed pur ¹⁵ Section 17(| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 | | | | | | Expires: Estimated a burden hou response | | | |
| (Print or Type Responses) | | | | | | | | | | | |
| Cooper Carla Symbol | | | | r Name and Ticker or Trading Iospitality Group, Inc.] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last)(First)(Middle)3. Date of (Month/D)C/O RUTH'S HOSPITALITY GROUP, INC., 1030 W. CANTON AVE, STE. 10003/11/20 | | | | | | | | _X_ Director 10% Owner Officer (give title Other (specify below) below) | | | |
| | | | | ndment, Date Original th/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| WINTER PA | ARK, FL 32789 | | | | | | | | More than One Ro | | |
| (City) | (State) | (Zip) | Table | e I - Non-De | erivative S | Securi | ties Ac | quired, Disposed o | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | Execution Execut | emed on Date, if /Day/Year) | 3. Transactio Code (Instr. 8) Code V | Disposed (Instr. 3, | l (A) o l of (D |) 5) Price | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 03/11/2017 | | | А | 5,133 | A | \$ 0 (1) | 33,048 | D | | |

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

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 control number.

 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) | 4. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and int of rlying ities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|-----------------------|---|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Edgar Filing: Ruths Hospitality Group, Inc. - Form 4

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Cooper Carla C/O RUTH'S HOSPITALITY GROUP, INC. 1030 W. CANTON AVE, STE. 100 WINTER PARK, FL 32789 | Х | | | | | | |
| Signatures | | | | | | | |
| /s/ Alice G. Givens, under Power of Attorney | 03/13/2017 | | | | | | |
| **Signature of Reporting Person | D | ate | | | | | |
| Evenlage attend of Deenserses | _ | | | | | | |

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) Consists of shares of restricted stock granted pursuant to the company's Amended and Restated 2005 Long-Term Equity Incentive Plan, which vest pro rata on an annual basis over the three-year period following March 11, 2017, the date of grant

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.