FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person * ORAN STUART I				2. Issuer Name and Ticker or Trading Symbol RED ROBIN GOURMET BURGERS INC [RRGB]							NC	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director Officer (give title below) Other (specify below)				w)	
(Last) (First) (Middle) 6312 S. FIDDLER'S GREEN CIRCLE, SUITE 200N				3. Date of Earliest Transaction (Month/Day/Year) 02/20/2014													
(Street) GREENWOOD VILLAGE, CO 80111				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any		Code (Instr. 8)		tion 4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		d of (D)	Beneficially Owned Following Reported Transaction(s)		Following	Ownership o Form:		Beneficial		
				(Month/Day/Year)		Coo	de	v	Amount	(A) or (D)	Price	Ì	(Instr. 3 and 4)		Direct or Indi (I) (Instr.	rect (I	wnership nstr. 4)
Common	Stock		02/20/2014			S			1,750	D	\$ 73.46 (1)	5 7,243 [£]	7,243 (2)		D		
Common Stock											1,000	1,000		I		ee ootnote	
Common Stock											1,000	1,000		I		ee ootnote	
Reminder:	Report on a s	separate line f	or each class of secu	rities beneficia	ally o	wned o		Per con	sons wh	o res	form a	re not req	ction of inf uired to res I OMB con	spond unle	ess	SEC 14	74 (9-02)
			Table II -	Derivative Se	curit	ties Ac	quire	ed, E	Disposed	of, or l	Benefici	ally Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day)	on 3A. Deemed Execution Deany		ction 3)	5.	ative ities ired resed	and Expiration Date (Month/Day/Year) And United Section 1.5		Eitle and count of derlying urities str. 3 and 8. Price of Derivative Security (Instr. 5)			Ow For Der Sec Dir or I	mership m of rivative curity: ect (D) ndirect	Beneficial Ownership (Instr. 4)		
				Code	V	(A)	(D)	Dat Exe		Expira Date	tion Ti	Amount or Number of Shares					

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
ORAN STUART I 6312 S. FIDDLER'S GREEN CIRCLE SUITE 200N GREENWOOD VILLAGE, CO 80111	X					

Signatures

/s/ Michael L. Kaplan, Attorney-in-Fact	02/20/2014		
**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).
- The price reported is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$73.450 to \$73.535, inclusive. The reporting person (1) undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- (2) Includes 4,979 restricted stock units that are subject to vesting and forfeiture restrictions.
- (3) The shares are held indirectly by the reporting person as co-trustee of a trust, the beneficiary of which is Olivia Oran.
- (4) The shares are held indirectly by the reporting person as co-trustee of a trust, the beneficiary of which is Gregory Oran.

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.