FORM	4
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Check this box if n	0
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

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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 Type Responses)												
1. Name and Address of Reporting ORAN STUART I	2. Issuer Name ar RED ROBIN G [RRGB]			0,		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <u>X</u> Director10% Owner Officer (give title below)Other (specify below)						
(Last) (First) 6312 S. FIDDLER'S GREE 200N	(Middle) N CIRCLE, SUITE	3. Date of Earliest 7 11/17/2015	Transactio	n (Mo	onth/Day/	Year)						
(Street) GREENWOOD VILLAGE	4. If Amendment, I	Date Origin	nal Fi	led(Month/I	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) (State)	(Zip)	Tal	ble I - Nor	-Deri	ivative Se	curities	Acqu	uired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Reported Transaction(s)	6. Ownership Form:	Beneficial		
		(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)		Ownership (Instr. 4)		
Common Stock	11/17/2015		S		1,500	D	\$ 67	3,983	D			
Common Stock	11/18/2015		G	V	70	D	\$0	3,913 (1)	D			
Common Stock								1,000	Ι	See footnote (2)		
Common Stock								1,000	Ι	See footnote (3)		

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. SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

abic II	Derritative Securities riequired, Disposed oil, or Deneneuily Owned
	(e.g., puts, calls, warrants, options, convertible securities)

	(e.g., puts, cans, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	on	Num	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secu	rities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) o							1	or Indirect	
						Dispo							Transaction(s)	· · /	
						of (D	· · · · · · · · · · · · · · · · · · ·						(Instr. 4)	(Instr. 4)	
						(Instr	· · · ·								
						4, and	15)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Excicisable	Date		of				
				Code	V	(A)	(D)				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	Х						

Signatures

/s/ Michael L. Kaplan, Attorney-in-Fact

**Signature of Reporting Person

11/18/2015 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).
- (1) Includes 3,023 restricted stock units subject to vesting and forfeiture restrictions.
- (2) The shares are held indirectly by the reporting person as co-trustee of a trust, the beneficiary of which is Olivia Oran.
- (3) 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.