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 * Buchmeier Michael				2. Issuer Name and Ticker or Trading Symbol RED ROBIN GOURMET BURGERS INC [RRGB]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Chief People Officer				
(Last) (First) (Middle) 6312 S. FIDDLERS GREEN CIRCLE, SUITE 200N				3. Date of Earliest Transaction (Month/Day/Year) 02/05/2020								Cin	iei i copie Oi	псеі		
(Street)				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 tired, Disposed of, or Beneficially Owned					
GREENWOOD VILLAGE, CO 80111 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu													
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Year		(Instr. 8)		(A) or Disposed		oisposed o	of (D) Benefic Reporte		ount of Securities cially Owned Following ed Transaction(s) 3 and 4)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Cod	le	V An	nount	(A) or (D)	Price	e			(I) (Instr. 4)	(IIIsti. 4)
Common Stock		02/05/2020			A		65	(1)	A	\$ 0	9,411 ⁽²	411 ⁽²⁾		D		
				Derivative Secu		_	tl uired	containe he form d, Dispo	ed in n disp sed of	this for plays a c f, or Bene	m are curre	e not requ ntly valid	OMB conf	ormation spond unle trol numbe	ss	1474 (9-02)
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Da	4. Transaction Code (Instr. 8)		5. Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. T Ame Und Secu	ount of derlying urities tr. 3 and	Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Beneficia Ownershi (Instr. 4) D) ect	
				Code	V	(A) (I		Date Exercisa		Expiration Date	Title	or Number of Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Buchmeier Michael 6312 S. FIDDLERS GREEN CIRCLE SUITE 200N GREENWOOD VILLAGE, CO 80111			Chief People Officer					

Signatures

/s/ Michael L. Kaplan, Attorney-in-Fact	02/06/2020
**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).
 - On March 19, 2019, the reporting person received a grant of performance share units (PSUs) representing 1,449 shares of the issuer's common stock (at target). The PSUs cliff vest at the end of a three year performance cycle, generally subject to the reporting person's continued employment through the applicable vesting date, with the number
- (1) of PSUs earned and issued determined based on achievement of performance objectives approved by the issuer's compensation committee for each year in the performance cycle. On February 5, 2020, the compensation committee determined that the objectives for the first tranche (2019) were achieved at a level resulting in 65 shares being earned by the reporting person. The shares issued will not vest until the end of the three year performance cycle on December 26, 2021.
- (2) Includes 6,373 restricted stock units subject to vesting and forfeiture restrictions.

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.