FORM 4

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

OMB APPROVAL
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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* Schweinfurth Lynn S				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 10% Owner X Officer (give title below) Other (specify below) CHIEF FINANCIAL OFFICER				
(Last) (First) (Middle) 6312 S FIDDLER'S GREEN CIRCLE, SUITE 200N			3. Date of Earliest Transaction (Month/Day/Year) 05/19/2022							CHILIT	INANCIAL	OTTICLK		
(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 Person Form filed by More than One Reporting Person					
GREENWOOD VILLAGE, CO 80111 (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, any (Month/Day/Yea	if Code (Instr.		(A) or (D) (Instr.	Disposed 3, 4 and 5 (A) or	of	d 5. Amount of Securities Beneficially Owned Fol Reported Transaction(s) (Instr. 3 and 4)		ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock		05/19/2022		F		1,068	111	\$ 8.16	69,190 ⁽²⁾		D			
Reminder:	Report on a s	separate line for	each class of secur	ties beneficially of		Per cor the	rsons w ntained form di	ho respo in this fo isplays a	rm are curre	not requesting ntly valid	OMB con	formation spond unle trol numbe	ss	1474 (9-02)
	_	I		e.g., puts, calls, w							1	I		1
Derivative Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	Execution Data	4. Transaction Code (Instr. 8)	5. Number of Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3 4, and 5	and Expiration Date (Month/Day/Year) we es d		Ame Und Secu	itle and ount of lerlying urities tr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Beneficial Ownershi (Instr. 4)	
				Code V	(A) (I		te ercisable	Expiratio Date	n Title	Amount or Number of Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director 10% Owner		Officer	Other			
Schweinfurth Lynn S 6312 S FIDDLER'S GREEN CIRCLE SUITE 200N GREENWOOD VILLAGE, CO 80111			CHIEF FINANCIAL OFFICER				

Signatures

/s/ Michael L. Kaplan, Attorney-in-Fact	05/23/2022		
**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).
- In connection with the vesting of 3,697 time-based restricted stock units which were granted on May 19, 2021, under the issuer's 2017 Performance Incentive Plan, as amended, the reporting person sold 1,068 of such shares to the issuer to satisfy tax withholding obligations. The sale was approved by the issuer's Compensation Committee in accordance with Rule 16b-3(d)(1) of the Exchange Act (the "Act"), and as such, the sale is exempt from Section 16(b) of the Act pursuant to Rule 16b-3(e) promulgated thereunder.
- (2) Includes 34,444 shares 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.