## 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

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

1. Name and Address of Reporting Person <sup>*</sup> Deno David J.						2. Issuer Name <b>and</b> Ticker or Trading Symbol Bloomin' Brands, Inc. [BLMN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 2202 NORTH WEST SHORE BLVD						3. Date of Earliest Transaction (Month/Day/Year) 02/11/2016									V Officer (give title 0			Other (s below)			
SUITE 500						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) TAMPA	Street) TAMPA FL 33607														Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(City) (State) (Zip)																				
		Tab	le I - I	Non-Deriv	vative	Sec	uriti	es A	cquired, I	Dis	posed	of, o	r Ber	neficial	ly Owne	d					
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				y/Year)	Exec if an	Deemed cution Date, וע nth/Day/Year)		Code (Ins	Transaction Code (Instr.		4. Securities Acquired ( <i>I</i> Disposed Of (D) (Instr. 3 5)			Benefic Owned	ies cially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amoun	t	(A) or (D)	Price	Followi Report Transa (Instr. 3	ed i		u. 4)	(insu: 4)		
Common Stock 02/11/20						16			A		20,91	<b>6</b> <sup>(1)</sup>	Α	\$16.1	.1 52	52,527		D			
Commor	016	16			F				\$16.1	.1 46	46,623		D								
		Т	able I						quired, Di s, option						v Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8)		n Number E		Expiration I	6. Date Exercisal Expiration Date (Month/Day/Year		r) Of Se Unde Deriv		Title and Amount Securities nderlying erivative Security nstr. 3 and 4)		9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		
					Code	v	(A) (D)		Date Exercisable		piration ate	tion Or		mount r umber f Shares							
Stock Option (right to buy)	\$14.58								(3)	05	/07/2022	Comr Stoo		00,000		400,000	0	D			
Stock Option (right to buy)	\$17.4								(4)	02	/26/2023	Comr Stor		2,551		72,551		D			
Stock Option (right to buy)	\$25.32								(5)	02	/27/2024	Comr Stor		58,800		58,800	,	D			
Stock Option (right to buy)	\$25.36								(6)	02	/26/2025	Comr Stor		5,760		55,760	,	D			

Explanation of Responses:

1. Represents shares of common stock acquired upon vesting of certain performance-based share units as a result of achievement ofperformance goals.

2. These shares were withheld by the issuer to pay for the applicable withholding tax due upon vesting of certain performance-based shareunits.

3. This stock option vests in five equal annual installments beginning on May 7, 2013.

4. This stock option vests in four equal annual installments beginning on February 26, 2014.

5. This stock option vests in four equal annual installments beginning on February 27, 2015.

6. This stock option vests in four equal annual installments beginning on February 26, 2016.

Remarks:

in-Fact 02/1 \*\* Signature of Reporting Person Date

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

 $^{\ast}$  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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.