FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person* Pace Philip J				Bl	2. Issuer Name and Ticker or Trading Symbol Bloomin' Brands, Inc. [BLMN]									ck all applic Directo Officer	or (give title		10% Ov	wner		
(Last)	(Last) (First) (Middle) 2202 N. WEST SHORE BLVD.					3. Date of Earliest Transaction (Month/Day/Year) 05/02/2023								"	below)	v) , Chief Accountir		below)	er	
SUITE 500					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) TAMPA	FI	FL 33607														X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)					Ru	Rule 10b5-1(c) Transaction Indication														
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	le I - No	n-Deriv	ative	Sec	uriti	ies Ac	quired	, Dis	posed o	of, or B	enefi	icially	Owned	t				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,			Transaction Dispose Code (Instr. 5)		ities Acqu d Of (D) (I			5. Amou Securition Benefici Owned I Reporte	ies Fo ially (D Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or Pi	rice	Transac (Instr. 3	tion(s)			(111511.4)	
Common Stock 05/02/2					2/2023	2023			M		2,500) A	\$0		15,643			D		
Common Stock 05/02/2				2/2023				F		609(1) [\$	24.85	15,034			D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		n of l		6. Date Exercisal Expiration Date (Month/Day/Year		•	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		E	8. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount nber res						
Restricted Stock Units	\$0.0 ⁽²⁾	05/02/2023			M			2,500	(3)		(4)	Common	2,5	500	\$0	5,000		D		

Explanation of Responses:

- 1. These shares of common stock were withheld by the issuer to pay for the applicable withholding tax due upon vesting of certain restricted stock units ("RSUs").
- 2. Each RSU represents the contingent right to receive one share of common stock of the issuer upon vesting of the unit.
- 3. On May 2, 2022, these RSUs were granted in the original amount of 7,500, which vest in three equal annual installments, with a final vesting in 2025.
- 4. This field is not applicable.

Remarks:

/s/ Kelly Lefferts, Attorney in Fact

05/03/2023

** Signature of Reporting Person

Date

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

- * 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.