FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB	APPROVAL

OMB Number: 3235-0362
Estimated average burden
hours per response: 1.0

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Form 3	Holdings Rep	orted.				OV	VNER	SH	IIP											
Form 4	Transactions	Reported.	Filed	I pursuant to or Section					urities Excha Company A											
Name and Address of Reporting Person* KADOW JOSEPH JOHN					2. Issuer Name and Ticker or Trading Symbol Bloomin' Brands, Inc. [BLMN]								Relationship of Reporting Person(s) to Issuer (Check all applicable) 10% Owners 10% Owners							
(Last) (First) (Middle) 2202 NORTH WEST SHORE BLVD					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/28/2014								X Officer (give title other (specify below) EVP, Chief Legal Officer							
SUITE 500				4. If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)							
(Street) TAMPA FL 33607														X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Si																			
		Tab	le I - Non-Deri		uriti	1	cquire					ially								
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any		3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3					5. Amount of Securities Beneficially		6. Ownership Form:		7. Nature of Indirect Beneficial			
			(monan bay) rear)		(Month/Day/Year)		8)		ount	(A) or (D)	Price		Owned at end of D		Dire	Direct (D) or O		wnership nstr. 4)		
Common Stock			12/17/2014			G			2,200	D	\$ <mark>0</mark>		306	06,522		D				
Common Stock			12/18/2014			G			225	D	\$0		306	306,297		D				
Common Stock 12/			12/18/2014			G			225	D	\$0		306,072			D				
Common Stock 12/18/2014					G			450	D \$0			305,622			D					
Common Stock 12/29/2014						G		400	D \$0			305,222			D					
		Ta	able II - Deriva (e.g., p	tive Secur outs, calls,									Owned							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		ber Expirati (Month/ mative rities sired r r osed) r. 3,		Exercisable and ion Date /Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		of De Se	Price erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersi Form: Direct (I or Indir (I) (Instr		Beneficial Ownership ect (Instr. 4)			
					(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amour or Number of Shares	er								
Stock Option (right to buy)	\$6.5						(1)		04/06/2020	Commor Stock	19,810			19,810		D				
Stock Option (right to buy)	\$10.03						(2)		12/09/2021	Commor Stock	134,25	134,250		134,250		D				
Stock Option (right to buy)	\$17.4						(3)		02/26/2023	Commor Stock	30,229)		30,229)	D				
Stock											1									

02/27/2024

24,331

Stock

24,331

D

Explanation of Responses:

(right to

buy)

\$25.32

- 1. This stock option is a replacement stock option and is fully vested.
- 2. This stock option vests in five equal installments beginning on December 9, 2012.

- 3. This stock option vests in four equal annual installments beginning on February 26, 2014.
- 4. This stock option vests in four equal annual installments beginning on February 27, 2015.

Remarks:

/s/ Kelly Lefferts, as Attomeyin-Fact 01/26/2015

** 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.