FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average b	ourden							
hours nor recogness:	0.5							

	tion 1(b).			File							ies Exchan			84		Hours	per re	sponse.	0.5
					_		. ,				mpany Act	of 194	10						
1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol Bloomin' Brands, Inc. [BLMN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
<u>Gonzal</u>	<u>ez Lisset</u>	<u>te R</u>			ᄜ	0011	IIII DI	anus	<u>5, IIIC.</u> [BLI	WIN]			(****	Directo			10% Ow	ner
,					3. [Date o	f Earliest	Trans	saction (M	onth/[Day/Year)			٦,	Officer below)	(give title		Other (s below)	pecify
(Last)	(F	rst)	(Middle)			01/20			•		, ,				, ,		nlv C	hain and C)n
2202 N.	WEST SHO	ORE BLVD.			\vdash														-
SUITE 5	000				4. 1	f Ame	ndment, I	Date o	of Original	Filed	(Month/Da	ay/Year	r)	6. In Line		loint/Group	Filing	(Check App	olicable
														7		led by One	Repo	orting Persor	ı
(Street)															Form fi	led by Mor	e than	One Repor	ting
TAMPA	FI		33607												Person	1			
					Rı	ule :	10b5-:	1(c)	Trans	act	ion Ind	icati	on						
(City)	(S	tate)	(Zip)					()											
					ΙП						action was m ns of Rule 1					n or written	plan th	at is intended	to
		Tab	le I - Nor	n-Deriv	ative	e Se	curities	s Ac	quired,	Dis	posed o	of, or	Bene	eficiall	y Owned	l			
1. Title of	Security (Ins	tr. 3)		2. Trans					3. 4.		4. Securi	curities Acquired (A)		(A) or	5. Amou	nt of 6. (6. Ov		7. Nature of Indirect
Date (Mont					th/Day/Year)		Execution Date, if any		Code (Instr. 5)			sposed Of (D) (Instr. 3,		3, 4 and	Beneficia	Securities Beneficially		r Indirect I	Beneficial Ownership (Instr. 4)
							(Month/Day/Y		ır) 8)	8)					Owned Following Reported		(I) (Instr. 4)		
									Code	۱v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)					
Common	Stock					\neg									1.9	891		D	
Common Stock															1,0	331		Ь	
		-	Table II -												Owned				
				(e.g., p	uts,	calls	s, warr	ants	, optioi	ıs, c	onverti	ble s	ecuri	ties)					
1. Title of Derivative	2. Conversion	3. Transaction Date	3A. Deeme							6. Date Exercisable and Expiration Date 7. Title and Am of Securities					9. Number of derivative		10. Ownership	11. Nature of Indirect	
Security or Exercise (Month/Day/Year) if any (Month/Day/Year) Derivative (Month/Day/Year)				, c	ode ((Month/Day/Year) Underlying Derivative Securities				Security		s	Form: Benefic Direct (D) Owner or Indirect (Instr. 4	Beneficial Ownership		
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	''	Acquired		(Instr. 3 and 4)				(111311. 3)	Beneficia Owned	1	(Instr. 4)				
Security					Disp		(A) or Disposed						Following Reported		(I) (Instr. 4)				
						of (D) (Ir 3, 4 and			·					Transact (Instr. 4)	ion(s)				
								Amoun		mount									
													0	r Iumber					
				,	ode	v	(A)	(D)	Date Exercisa		Expiration Date	Title	o	f Shares					
Restricted				-+	\neg		 	H		\dashv			\dashv						
Stock	\$0 ⁽¹⁾	11/01/2023			Α		12,055		(2)		(3)	Comm		2,055	\$0	12,05	5	D	

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents the contingent right to receive one share of common stock of the issuer upon vesting of the unit.
- 2. On November 1, 2023, these RSUs were granted in the original amount of 12,055, which vest in three equal annual installments, with a final vesting in 2026.
- 3. This field is not applicable.

Remarks:

/s/ Kelly Lefferts, Attorney in 11/08/2023

** 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.