Toomy Kevin W Form 4 March 05, 2018

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL
OMB

Number: 3235-0287

January 31,

Expires: 2005
Estimated average

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obligations

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

may continue.

See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(C:+-)

(Print or Type Responses)

(Ctata)

(7:n)

| 1. Name and Address of Reporting Person * Toomy Kevin W | | | 2. Issuer Name and Ticker or Trading Symbol Ruths Hospitality Group, Inc. [RUTH] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|---|------------------|------------------|---|---|--|--|--|
| (Last) 1030 W. CAN | (First) TON AVE. | (Middle) STE 100 | 3. Date of Earliest Transaction (Month/Day/Year) 03/03/2018 | Director 10% OwnerX Officer (give title Other (specify below) President & COO - RCSH | | | |
| (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 | | | |
| WINTER PAI | RK, FL 3278 | 9 | | Form filed by More than One Reporting Person | | | |

| (City) | (State) (| Table Table | e I - Non-D | erivative | Secur | ities Acqu | uired, Disposed of | f, or Beneficiall | y Owned |
|------------------------|--------------------------------------|-------------------------------|-------------------------------------|--------------|------------------|------------------------------------|--|---------------------------------------|-----------------------|
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | 3. Transactio | 4. Securi | | | 5. Amount of Securities | 6. Ownership Form: Direct | 7. Nature of Indirect |
| (Instr. 3) | | any (Month/Day/Year) | Code (Instr. 3, 4 and 5) (Instr. 8) | | | Beneficially Owned Following | (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | Code V | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | |
| Common Stock | 03/03/2018 | | F | 1,065 (1) | D | \$ 25.15 | 133,794 | D | |
| Common Stock | 03/03/2018 | | F | 3,871 (1) | D | \$ 25.15 | 129,923 | D | |

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

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SEC 1474

(9-02)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative | 2. Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. Transacti | 5. orNumber | 6. Date Exerc Expiration D | | 7. Title Amount | | 8. Price of Derivative | 9. Nu Deriv |
|--|---------------|--------------------------------------|-------------------------------|--------------------|----------------|--|--------------------|---------------------|--|------------------------|---|
| Security or Exerc (Instr. 3) Price of Derivati Security | | | any (Month/Day/Year) | Code (Instr. 8) | of | of (Month/Day/Year) Derivative Decurities Acquired A) or Disposed of (D) Instr. 3, | | Underly Securiti | | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title N | Amount or Number of Shares | | |

Reporting Owners

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

Toomy Kevin W 1030 W. CANTON AVE. STE 100 WINTER PARK, FL 32789

President & COO - RCSH

Signatures

/s/ Alice G. Givens, under Power of 03/05/2018 Attorney

> **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).
- (1) The reported disposition represents the withholding of shares to cover tax obligations arising from the vesting of restricted stock.

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.

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