## Edgar Filing: Brookdale Senior Living Inc. - Form 4

Brookdale S Form 4 May 23, 201	enior Living Inc. 6								
FORM	1				OMB AF	PROVAL			
	UNITED STAT	ES SECURITIES AND EXC Washington, D.C. 205		COMMISSION	OMB Number:	3235-0287			
Check th if no long	ner.					January 31, 2005			
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSH					Estimated a	average			
Section 1 Form 4 c	stion 16. SECURITIES					burden hours per response 0.5			
Form 5		o Section 16(a) of the Securiti	es Exchang	e Act of 1934,	response	0.5			
obligatio may con	ns Section $17(a)$ of t	ne Public Utility Holding Com	-		n				
See Instr		(h) of the Investment Company	y Act of 194	40					
1(b).									
(Print or Type ]	Responses)								
、 <b>.</b> .	• •								
	Address of Reporting Person	2. Issuer Name and Ticker or	d Ticker or Trading 5. Relationship of Reporting I Issuer			son(s) to			
Kussow Da	wn L	Symbol	-						
		Brookdale Senior Living I	nc. [BKD]	(Checl	k all applicable	)			
(Last)	(First) (Middle)	3. Date of Earliest Transaction		D:	100	0			
6737 W W	ASHINGTON	(Month/Day/Year) 05/20/2016	Director 10% Owner X Officer (give title Other (specify						
ST., SUITE		03/20/2010	03/20/2010			below) below) SVP & Chief Accounting Officer			
	(Street)	4. If Amondmont Data Original			-				
	(Succi)	Filed(Month/Day/Year)	4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line)			
		1 1100((1101111)2 uj( 1011))		_X_ Form filed by One Reporting Person					
MILWAUK	XEE, WA 53214			Form filed by M Person	lore than One Re	porting			
(City)	(State) (Zip)	Table I - Non-Derivative S	Securities Aco	uired. Disposed of	. or Beneficial	lv Owned			
1.Title of	2. Transaction Date 2A. I		ies Acquired	5. Amount of	6. Ownership	-			
Security		tion Date, if Transaction(A) or Dis	sposed of (D)	Securities Beneficially	Form: Direct				
(Instr. 3)	any (Mor	Code (Instr. 3, 4 th/Day/Year) (Instr. 8)	· · · · · · · · · · · · · · · · · · ·			Beneficial Ownership			
		(Inst. 6)		Owned Following	Indirect (I) (Instr. 4)	(Instr. 4)			
			(A)	Reported Transaction(s)					
			or	(Instr. 3 and 4)					
Common		Code V Amount	(D) Price						
Stock	05/20/2016	F 128 (1)	D <sup>+</sup> 18.03	26,935	D				

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

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 control number.

 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. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8)	5. tionNumber of ) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
I O	Director	10% Owner	Officer	Other			
Kussow Dawn L 6737 W. WASHINGTON ST. SUITE 2300 MILWAUKEE, WA 53214			SVP & Chief Accounting Officer				
Signatures							
/s/ Chad C. White, By Power of Attorney	of 05/23/2016						
**Signature of Reporting Person		Dat	ie				

## 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).
- Represents share withholding to satisfy tax withholding obligations due upon the vesting of restricted stock previously granted to the (1) reporting person.

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.