Edgar Filing: CAPITAL SENIOR LIVING CORP - Form 4

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CAPITAL S Form 4	ENIOR LIVING	CORP									
March 28, 20)17										
FORM	14									PPROVAL	
	STATES	S SECURITIES AND EXCHANGE C Washington, D.C. 20549				IGE (COMMISSION	OMB Number:	3235-0287		
Check the if no long										January 31, 2005	
subject to Section 1	5 SIAIEM									average	
Form 4 o				burden hou response	•						
Form 5 obligation	no -						-	e Act of 1934,			
may cont	inue. Section 17(a		Public Ut of the In	•	. .			f 1935 or Sectio	n		
See Instru 1(b).	uction	50(II)	of the m	vestment	Company	Act	01 194	+0			
(Print or Type I	Responses)										
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship of								f Reporting Per	son(s) to		
BRICKMA		Symbol					Issuer				
			CAPITAL SENIOR LIVING CORP [CSU]				ORP	(Check all applicable)			
(Last)				Date of Earliest Transaction Month/Day/Year)				Director 10% Owner X Officer (give title Other (specify			
14160 DAL	03/28/2017					below) below) SVP Gen. Counsel & Secretary					
PARKWAY	, SUITE 300										
(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 			
DALLAS, 7	TX 75254							fore than One Reporting			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecurit	ies Acc	uired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Date			3. Transactio			-	5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year)	any	on Date, 11	Code	on(A) or Dis (D)	sposed	01		Form: Direct (D) or	Beneficial	
		(Month/	/Day/Year)	(Instr. 3, 4	and t	5)	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
									Reported	(IIISU. 4)	
						(A) or		Transaction(s) (Instr. 3 and 4)			
Common				Code V	Amount 21,089	(D)	Price	(mouto and +)			
Stock	03/28/2017			А	(1)	А	\$0	154,889	D		
Common					<u> </u>						
Stock	03/28/2017			А	(2)	А	\$0	186,523	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.

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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 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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
F8	Director	10% Owner	Officer	Other		
BRICKMAN DAVID R 14160 DALLAS PARKWAY SUITE 300 DALLAS, TX 75254			SVP Gen. Counsel & Secretary			
Signatures						

/s/ David R. Brickman 03/28/2017 <u>**Signature of Date</u> Reporting Person

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) Represents shares of restricted stock granted on March 28, 2017 under the Company's 2007 Omnibus Stock and Incentive Plan, which vest in three installments of 33%, 33% and 34% on March 28, 2018, March 28, 2019 and March 28, 2020, respectively.

Represents shares of performance-based restricted stock granted on March 28, 2017 under the Company's 2007 Omnibus Stock and

(2) Incentive Plan, which vest subject to the satisfication of certain performance conditions upon the later of (i) the third anniversary of the grant date or (ii) the date that the Compensation Committee of the Company's Board certifies that such performance conditions have been satisfied.

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.