## Edgar Filing: Ruths Hospitality Group, Inc. - Form 4

Form 4	ality Group, Inc.									
July 27, 2012 FORM Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin	4 UNITED S' s box er STATEMI 5. s Filed pursu s section 17(a)	W ENT OF CHA uant to Section of the Public	SECURITIES AND EXCHANGE C Washington, D.C. 20549 CHANGES IN BENEFICIAL OW SECURITIES ection 16(a) of the Securities Exchang Public Utility Holding Company Act of				ERSHIP OF Act of 1934, 1935 or Section	OMB Number: Expires: Estimated a burden hou response	•	
See Instruction 1(b).30(h) of the Investment Company Act of 1940(Print or Type Responses)										
1. Name and Address of Reporting Person <u>*</u> ODONNELL MICHAEL P			2. Issuer Name <b>and</b> Ticker or Trading Symbol Ruths Hospitality Group, Inc. [RUTH]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	S HOSPITALITY C., 1030 W. CAN	(Month 07/25	3. Date of Earliest Transaction (Month/Day/Year) 07/25/2012				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) President, CEO and Director			
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
	ARK, FL 32789						Form filed by N Person	fore than One Re	porting	
(City)	(State) (Z	Zip) Ta	ble I - Non-D	erivative S	ecurities	s Acqu	iired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Ye	Code	on(A) or Dia (D) (Instr. 3, 4	(A) (D)	of Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Restricted Stock Grant	07/25/2012		А	71,607		(1)	416,776	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. Transact Code (Instr. 8)	5. tionNumber of ) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code N	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## Edgar Filing: Ruths Hospitality Group, Inc. - Form 4

## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
ODONNELL MICHAEL P C/O RUTH'S HOSPITALITY GROUP, INC. 1030 W. CANTON AVENUE, STE. 100 WINTER PARK, FL 32789	Х		President, CEO and Director					
Signatures								
/s/ James S. Rowe, under Power of Attorney	07/27	/2012						
**Signature of Reporting Person	Da	te						
Fundamentian of Deensers	_							

## **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) Consists of shares of restricted stock granted pursuant to the company's 2005 Long-Term Equity Incentive Plan, which vest pro rata on an annual basis over the three-year period following July 25, 2012, the date of the grant.

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.