Brookdale Senior Living Inc.

Form 4 May 14, 2015

### FORM 4

#### OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

Expires: January 31, 2005

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

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Form 4 or Form 5 obligations may continue.

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 30(h) of the Investment Company Act of 1940

See Instruction 1(b).

(Print or Type Responses)

1 Name and Address of Departing De

RICHARDSON BRYAN D			2. Issuer Name and Ticker or Trading Symbol Brookdale Senior Living Inc. [BKD]	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check all applicable)			
111 WESTW0 400	OOD PLAC	CE, SUITE	(Month/Day/Year) 05/13/2015	Director 10% Owner _X Officer (give title Other (specify below)  EVP & Chief Admin Officer			
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
BRENTWOO	DD, TN 3702	27	Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acc	uired. Disposed of, or Beneficially Owned			

` •	,	` ' 1 an	ie i - N	on-1	Jerivative i	Secur.	iues Acqui	rea, Disposea oi,	or Benefician	y Owned
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. 4. Securities Acquired (Transactionor Disposed of (D)			. ,	5. Amount of Securities	6. Ownership	7. Nature of Indirect	
(Instr. 3)	• •	any	Code (Instr. 3, 4 and 5)			Beneficially	Form:	Beneficial		
		(Month/Day/Year)	(Instr.	8)				Owned	Direct (D)	Ownership
								Following	or Indirect	(Instr. 4)
						(A)		Reported	(I)	
						or		Transaction(s)	(Instr. 4)	
			Code	V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	05/13/2015		S		30,000	D	\$ 36.005	188,743	D	
Common Stock	05/13/2015		G	V	5,000	D	\$0	183,743	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.

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	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title a		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		onNumber	Expiration D		Amount		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	_	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities	S		(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	,				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(IIISti
					4, and 5)						
					4, and 3)						
								A	mount		
						D.	E	01	r		
							Expiration Date		umber		
								01			
				Code V	(A) (D)				hares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

RICHARDSON BRYAN D 111 WESTWOOD PLACE SUITE 400 BRENTWOOD, TN 37027

**EVP & Chief Admin Officer** 

### **Signatures**

/s/ Chad C. White, By Power of Attorney

05/14/2015

\*\*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).

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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