| Texas Road Form 4 August 07, 2 | | | | | | | | | | | | |
|--|------------------------------------|-------------------------|---------------------------------------|-------------------------------------|--------------------|--|--|---|------------------|------------------|--|--|
| FORM | ПЛ | | | | | | | | OMB AF | PROVAL | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | | | |
| Check th if no lon | aar | | | | | | | | Expires: | January 31, | | |
| subject t | | EMENT O | F CHAN | GES IN BENEFICIAL OWNERSH | | | | NERSHIP OF | Estimated a | 2005 Laverage | | |
| Section | 16. | SECURITIES | | | | | | | burden hours per | | | |
| Form 4 o Form 5 | _ | | | | | | response | 0.5 | | | | |
| obligatic | - | • | | | | | • | e Act of 1934, | | | | |
| may con | tinue. Section | | | • | • | · · | • | 1935 or Section | 1 | | | |
| See Instr | ruction | 50(II |) of the In | vestment | Compar | iy Ac | 1 01 194 | 0 | | | | |
| 1(b). | | | | | | | | | | | | |
| (Print or Type) | Responses) | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | Address of Report | ing Person [*] | 2. Issue | r Name and Ticker or Trading | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| MOORE G | REGORY N | | Symbol | ol | | | | | | | | |
| | | | Texas F | s Roadhouse, Inc. [TXRH] | | | | | | | | |
| (Last) | (First) | (Middle) | 3. Date of | f Earliest Tr | ansaction | | | (chici | | , | | |
| | | | Ionth/Day/Year) | | | | _X_ Director10% Owner | | | | | |
| C/O TEXAS ROADHOUSE, 08/05/20 INC., 6040 DUTCHMANS LANE | | | /2015 | | | Officer (give title Other (specify below) below) | | | | | | |
| INC., 6040 | DUICHMAN | 5 LANE | | | | | | | | | | |
| | | | endment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | | | | | |
| | | | d(Month/Day/Year) | | | | Applicable Line) _X_ Form filed by One Reporting Person | | | | | |
| LOUISVIL | LE, KY 40205 | i | | | | | | Form filed by M Person | | | | |
| (City) | (State) | (Zip) | Tab | le I - Non-D |) erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | | |
| 1.Title of | 2. Transaction I | Date 2A. Dee | emed | 3. | 4. Securi | ties A | cquired | 5. Amount of | 6. Ownership | 7. Nature of | | |
| Security | (Month/Day/Year) Execution Date, i | | | Transaction(A) or Disposed of (D) | | | | Securities | Form: Direct | Indirect | | |
| (Instr. 3) any (Month/Day/Year) | | | Code (Instr. 3, 4 and 5) $(Instr. 8)$ | | | | Beneficially | (D) or Indirect (I) | Beneficial | | | |
| | | (INIOIIUI/ | Day/ 1 cal) | (11150.0) | | | | Owned Following | (Instr. 4) | (Instr. 4) | | |
| | | | | | | (A) | | Reported | · / | × , | | |
| | | | | | | or | | Transaction(s) | | | | |
| | | | | Code V | Amount | (D) | Price | (Instr. 3 and 4) | | | | |
| Common | 0010510015 | | | D | F 10 | | \$ | (1.100 | | Moore | | |
| Stock | 08/05/2015 | | | Р | 510 | А | 39.18 | 61,400 | Ι | Family | | |
| | | | | | | | | | | Trust (1) | | |

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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Price o Derivativ Security (Instr. 5) |
|---|---|---|---|---------------------------------------|---|---------------------|--------------------|---|--|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Restricted Stock Units | (2) | | | | | (3) | (3) | Common Stock | 8,500 | |
| Restricted Stock Units | (2) | | | | | <u>(4)</u> | <u>(4)</u> | Common Stock | 8,500 | |
| Restricted Stock Units | (2) | | | | | (5) | (5) | Common Stock | 8,500 | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|------------------------|-------|--|--|--|
| | Director | 10% Owner | i ps Officer | Other | | | |
| MOORE GREGORY N C/O TEXAS ROADHOUSE, INC. 6040 DUTCHMANS LANE LOUISVILLE, KY 40205 | Х | | | | | | |
| Signatures | | | | | | | |
| /s/ Celia Catlett, by Power of Attorney | 08 | 8/07/2015 | | | | | |
| **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).

The reporting person is the co-trustee of the Moore Family Trust and has investment control over the securities. The reporting person(1) disclaims beneficial ownership within the meaning of Rule 16a-1 of the Securities Exchange Act of 1934, as amended, of such portion of those shares in which the reporting person has no actual pecuniary interest.

- (2) Each restricted stock unit represents a conditional right to receive one share of the Company's Common Stock.
- (3) The restricted stock units vest on January 8, 2016. Delivery of the shares to the reporting person will occur on January 8, 2016, subject to the reporting person's continued service with the Company.

- (4) The restricted stock units vest on January 8, 2017. Delivery of the shares to the reporting person will occur on or about January 8, 2017, subject to the reporting person's continued service with the Company.
- (5) The restricted stock units vest on January 8, 2018. Delivery of the shares to the reporting person will occur on January 8, 2018, subject to the reporting person's continued service with the Company.

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.