### Edgar Filing: ENSIGN GROUP, INC - Form 4

ENSIGN GI	ROUP, INC										
Form 4											
September 0	02, 2016										
FORM	<b>FORM 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSIO						OMB APPROVAL				
	UNITE	ED STATES					NGE C	COMMISSION	OMB	3235-0287	
Check th	nis box		was	shington,	D.C. 20	549			Number:	January 31,	
if no lon	aer	EMENT O	E CHAN	CECIN	DENIDE			NEDSHID OF	Expires:	2005	
subject t	0		F CHAN	GES IN BENEFICIAL OWNERSHIP OF				VERSHIF OF	Estimated average burden hours per response 0.5		
Section 1 Form 4 c				SECUN	SECURITIES						
Form 5		pursuant to	Section 1	6(a) of th	e Securit	ies E	xchang	e Act of 1934,	response	0.5	
obligatio	ons Section	<b>^</b>					•	1935 or Section	n		
may con <i>See</i> Instr	unue.			vestment	-	~ •					
1(b).	uetion				•	•					
(Print or Type	Responses)										
1 Name and /	Address of Report	ing Derson *	2.1	NT 1		т 1 <sup>.</sup>		5 Delationship of	Paparting Dars	on(s) to	
Keetch Cha	-			der Franke und Frener of Frading			5. Relationship of Reporting Person(s) to Issuer				
			Symbol ENSIG	N GROU	P INC II	FNSC	31				
						21100	2]	(Chec	k all applicable	)	
(Last)	(First)	(Middle)		Earliest Tr	ransaction			Director	100/	Owner	
27101 PUE	RTA REAL, S	SUITE 450	(Month/E 08/31/2	•				Director X Officer (give		er (specify	
2,101101			00/51/2	010				below)	below) ve Vice Preside	ant.	
	(7)										
			Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Moi	nth/Day/Year	:)			Applicable Line) _X_ Form filed by C	One Reporting Pe	rson	
MISSION V	VIEJO, CA 92	691						Form filed by M	1 0		
								Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction	Date 2A. Deer	med	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye		on Date, if	Transactio Code	on(A) or Di	-		Securities	Form: Direct		
(Instr. 3)		any (Month/Day/Year)			(Instr. 3,	4 and	5)	Beneficially Owned	•		
		(Wonding)	Duy, I'cui)	(Instr. 8)				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
G				Code V	Amount	(D)	Price	(msu. 5 and 4)			
Common Stock	08/31/2016			А	2,800 (1)	А	\$ 18.79	49,081	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)

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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. Number prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Perivative Expiration Date urities (Month/Day/Year) uired or posed of tr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Employee Stock Option (right to buy)	\$ 18.79	08/31/2016		А	7,000	08/31/2017 <u>(2)</u>	08/31/2026	Common Stock	7,000

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Keetch Chad 27101 PUERTA REAL SUITE 450 MISSION VIEJO, CA 92691			Executive Vice President			
Signatures						
Chad A. Keetch 09	/02/2016					

## <u>\*\*</u>Signature of

Date

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) These shares vest in five equal annual installments beginning on August 31, 2016.
- (2) This option vests in five equal annual installments beginning on August 31, 2016.

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.