FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours ner resnonse	. 05							

(I) (Instr. 4)

Following Reported

Transaction(s) (Instr. 4)

	tion 1(b).	Filed	ed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940								nours per response: U.5						
1. Name and Address of Reporting Person*  Fuller Daniel S  (Last) (First) (Middle)				2. Issuer Name and Ticker or Trading Symbol BRINKER INTERNATIONAL, INC [ EAT ]								theck all a	hip of Reporti pplicable) ector ficer (give title low)		10% O Other (below)	wner	
` ′	ast) (First) (Middle) 000 OLYMPUS BLVD.				3. Date of Earliest Transaction (Month/Day/Year) 11/29/2021								S	SVP, General Counsel & Sec.			
(Street) DALLAS (City)	S TX		75019 Zip)		4. If A	mend	ment, Date o	f Origina	al Filed	d (Month/Day	/Year)		ne) X Fo	l or Joint/Grou rm filed by Or rm filed by Mo rson	ne Repo	orting Pers	on
		Table	I - Nor	n-Deriva	tive S	ecui	rities Acq	uired,	Dis	posed of,	or Bei	nefici	ally Ov	/ned			
1. Title of \$	Security (Inst			1-Deriva 2. Transac Date (Month/Da	tion	2A. D Exec if any	Deemed ution Date,	3. Transa Code (	ction	4. Securities Disposed Of 5)	Acquire	d (A) or	5. A Sec Ber Ow	mount of urities eficially led Following	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
1. Title of S	Security (Inst			2. Transac Date	tion	2A. D Exec if any	Deemed ution Date,	3. Transa Code (	ction	4. Securities Disposed Of	Acquire	d (A) or	5. A Sec Ber Ow Rep Trai	mount of urities eficially	Form: (D) or	: Direct Indirect str. 4)	of Indirect Beneficial
1. Title of S				2. Transac Date	tion y/Year)	2A. D Exec if any	Deemed ution Date,	3. Transa Code ( 8)	iction Instr.	4. Securities Disposed Of 5)	Acquired (D) (Insti	d (A) or r. 3, 4 aı	5. A Sec Ber Ow Rep Tra (Ins	mount of urities eficially led Following orted usaction(s)	Form: (D) or (I) (Ins	: Direct Indirect str. 4)	of Indirect Beneficial Ownership
		r. 3)	ble II -	2. Transac Date (Month/Da	etion by/Year) 2021	2A. D Exec if any (Mon	Deemed ution Date, / th/Day/Year)	3. Transa Code ( 8) Code	v Dispo	4. Securities Disposed Of 5)	(A) or (D)  A  R  Acquired  (A) or (D)  A	Price \$35.	5. A Sec Ber Ow Rep Track (Ins	mount of urities eficially led Following orted issaction(s) ir. 3 and 4)	Form: (D) or (I) (Ins	: Direct Indirect str. 4)	of Indirect Beneficial Ownership

**Explanation of Responses:** 

Security

Remarks:

Christopher L. Green, Attorney-in-Fact for Daniel S. 11/30/2021 <u>Fuller</u>

\*\* Signature of Reporting Person Date

Security (Instr. 3 and 4)

Title

Expiration

Date

Amount Number

Shares

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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).

Code

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

(A) or Disposed

of (D) (Instr. 3, 4 and 5)

(D)

(A)

Date

Exercisable