

FIESTA RESTAURANT GROUP, INC.

Reported by **TAFT TIMOTHY P**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 11/19/14 for the Period Ending 11/17/14

Address 14800 LANDMARK BOULEVARD, SUITE 500

ADDISON, TX 75254

Telephone 972-702-9300

CIK 0001534992

Symbol FRGI

Fiscal Year 12/31





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Taft Timothy P					Fiesta Restaurant Group, Inc. [FRGI]						X Direc	etor		10% (Owner		
(Last)	t) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)						X_Officer (give title below) Other (specify below)						
C/O FIESTA RESTAURANT					11/17/2014						CEO and	Presiden	ıt				
GROUP, INC BOULEVAR	,			RK													
(Street)				4. If Amendment, Date Original Filed (MM/DD/YYYY)						6. Individual or Joint/Group Filing (Check Applicable Line)							
ADDISON, T (City)	(State)		(Zip)												Reporting Per		1
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1			2. Ti	rans.	2A. Deemed Execution Date, if	3. Trans. Code (Instr. 8)		4. Securities A (A) or Dispos (Instr. 3, 4 and		sed of (D)	5. Amount of Secur Following Reported (Instr. 3 and 4)		ities Beneficially Owned Transaction(s)		Ownership Form:	7. Nature of Indirect Beneficial Ownership	
				any		Code	V	Amount	(A) or (D)	Price							
Common Stock, par value \$0.01 per share				11/1	17/2014		s		7115	D	\$55.81 ⁽¹⁾		192443			D	
Common Stock, par value \$0.01 per share				11/1	17/2014		s		100	D	\$56.63		192343		D		
Common Stock, par value \$0.01 per share				11/1	17/2014		S		35	D	\$56.76		192308			D	
Tab	ole II - De	rivati	ve Securi	ties I	Benefi	cially O	wned	((<i>e.g</i> . , pı	ıts,	calls, wa	rrant	ts, options,	, converti	ble secur	rities)	
1. Title of Derivate Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 2. Conversion or Exercise Price of Derivative Security 3. Trans. Deemed Execution Date, if any		Γrans.	5. Nu Deriv Secur Acqu Dispo (Instr 5)	and Expiration Date				7. Title and Amoun Securities Underlyi Derivative Security (Instr. 3 and 4)		ving y	Derivative Security	of 9. Number of derivative Securities Beneficially Owned Following Reported Transaction	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	Beneficial			
				Code	(A)	(D)	Date Exerci	sat	ole Date	ation	Title Share		Number of		(s) (Instr. 4)		

Explanation of Responses:

(1) The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$55.42 to \$56.42 inclusive. The Reporting Person undertakes to provide to the Issuer, any stockholder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in footnote (1) to this Form 4.

Reporting Owners

Denomina Orana Nama / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Taft Timothy P C/O FIESTA RESTAURANT GROUP, INC. 14800 LANDMARK BOULEVARD, SUITE 500 ADDISON, TX 75254	X		CEO and President	t			

Signatures

/s/ Timothy P. Taft	11/18/2014			
** Signature of Reporting Person	Date			

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).

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 control number.