ENSIGN GROUP, INC

Form 5

February 16, 2016

#### **OMB APPROVAL** FORM 5 **OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer Christensen Roy E Symbol ENSIGN GROUP, INC [ENSG] (Check all applicable) (Last) (First) (Middle) 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) \_X\_ Director 10% Owner

12/31/2015

4. If Amendment, Date Original

Filed(Month/Day/Year)

# MISSION VIEJO, CAÂ 92691

(City)

27101 PUERTA REAL, SUITE 450

(Street)

(Zin)

\_X\_Form Filed by One Reporting Person \_\_\_ Form Filed by More than One Reporting Person

6. Individual or Joint/Group Reporting

Officer (give title

below)

\_\_X\_\_ Other (specify

below)

Chairman of the Board

(check applicable line)

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(City)	(State)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securit (A) or Dis (D) (Instr. 3, 4)	sposed	of	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	09/09/2015	Â	G	10,000	D	\$ 0	1,179,412 (1)	I	Christensen Family Trust dated 8/17/92 (2)
Common Stock	10/15/2015	Â	G	5,000	D	\$ 0	1,174,412	I	Christensen Family Trust dated 8/17/92 (2)

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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.

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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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative	6. Date Exerc Expiration Day/ (Month/Day/	ate	7. Title Amount Underly Securiti	t of ying	8. Price of Derivative Security (Instr. 5)	
	Derivative Security			Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	d d		(Instr. 3 and 4)			
				(A) (D)	Date Exercisable	Expiration Date	Title N	Number		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Christensen Roy E

27101 PUERTA REAL, SUITE 450 X Chairman of the Board MISSION VIEJO, CAÂ 92691

### **Signatures**

/s/ Suzanne Snapper as power of attorney

02/16/2016

\*\*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).
- (1) On December 23, 2015, the Company effected a 2-for-1 stock split. The number of shares reported throughout this Form 5 have been adjusted to reflect the stock split.
- These shares are directly owned by the Christensen Family Trust dated 8/17/92, as ten percent owner of the issuer, and indirectly owned by Roy E. Christensen and Carol M. Christensen as trustees of the trust. Roy E. Christensen is a director, officer and ten percent owner of the issuer, Carol M. Christensen is a ten percent owner of the issuer.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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