

CAPITAL SENIOR LIVING CORP
 Form 3/A
 January 31, 2017

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *			2. Date of Event Requiring Statement		3. Issuer Name and Ticker or Trading Symbol	
Â Arbiter Partners Capital Management LLC			(Month/Day/Year)		CAPITAL SENIOR LIVING CORP [CSU]	
(Last)	(First)	(Middle)	11/16/2016			
530 FIFTH AVENUE, 20TH FLOOR					4. Relationship of Reporting Person(s) to Issuer	
(Street)					(Check all applicable)	
NEW YORK, NY 10036					5. If Amendment, Date Original Filed(Month/Day/Year)	
(City)	(State)	(Zip)			11/21/2016	
					6. Individual or Joint/Group Filing(Check Applicable Line)	
			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below)		<input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	3,000,584	I	Investment Manager <u>(1)</u>

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Put Option(obligation to buy)	06/16/2016	12/16/2016	Common Stock	20,000	\$ 17.5	I	Investment Manager ⁽¹⁾
Put Option(obligation to buy)	06/07/2016	12/16/2016	Common Stock	80,000	\$ 20	I	Investment Manager ⁽¹⁾
Put Option(obligation to buy)	04/22/2016	12/16/2016	Common Stock	125,100	\$ 22.5	I	Investment Manager ⁽¹⁾
Put Option(obligation to buy)	05/06/2016	12/16/2016	Common Stock	519,900	\$ 25	I	Investment Manager ⁽¹⁾
Put Option(obligation to buy)	10/31/2016	06/16/2017	Common Stock	30,000	\$ 20	I	Investment Manager ⁽¹⁾
Put Option(obligation to buy)	11/10/2016	06/16/2017	Common Stock	20,000	\$ 15	I	Investment Manager ⁽¹⁾

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Arbiter Partners Capital Management LLC
530 FIFTH AVENUE, 20TH FLOOR
NEW YORK, NY 10036

Â Â Â Â

Signatures

/s/ Joshua
Musher

01/31/2017

**Signature of
Reporting Person

 Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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) The Reporting Person may be considered the beneficial owner of the securities reported on this Form, within the meaning of Rule 13d-3 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), by virtue of its discretionary power to direct the disposition of such securities. The Reporting Person disclaims beneficial ownership of the securities for all purposes of Section 16 of the Exchange Act, except to the extent of its pecuniary interest therein.

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.