## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	

OMB APF	PROVAL
OMB Number:	3235_028

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Estimated average burden hours per response Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol  Dine Brands Global, Inc. [ DIN ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Poulter	<u>Martha</u>					110 1	<u> Dranus</u>	GIO	<u>, 111</u>	<u>c.</u> [	DIN J			1		,		10% Ov	vner
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)								Officer below)	(give title		Other (sbelow)	specify		
10 WES	T WALNU	ΓSTREET			10,	00,2													
5TH FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														✓	Form fi	led by One	Repo	orting Perso	n
PASADE	ENA C	A	91103												Form fi Person		e than	One Repo	rting
(City)	(S	tate)	(Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,			3. Transaction Code (Instr. 3, 4) 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)			4 and Securitie Benefici Owned F		es For ally (D) Following (I) (		rm: Direct ) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
					Code V Amount (A) or (D)			r <sub>P</sub>	rice	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)					
	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 Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	ate, Tr	4. Transactior Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Yea		of Securities		ties g Security		3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				C	ode	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Sha	ber					
Restricted Stock Units (Dividend Equivalent	(1)	10/08/2024			A		46.098		(2)		(2)	Common Stock	46.	098	\$0.00	2,737.8	34	D	

## **Explanation of Responses:**

Rights)

- 1. Each dividend equivalent right is the economic equivalent of one share of common stock
- 2. Represents dividend equivalent rights that accrued on the underlying award of restricted stock units. Dividend equivalent rights accrue when and as dividends are paid on the common stock underlying the applicable restricted stock units and vest proportionately with and are subject to settlement and expiration upon the same terms as the restricted stock units to which they relate.

/s/ Christine K. Son as attorney-in-fact for Martha C. 10/09/2024 Poulter

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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 Number.