FORM 4	4
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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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02)

#### 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

(Print or Type Response	es)										
1. Name and Address of Clawson Christophe	2. Issuer Name a BRUNSWICK			rading Sym	bol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) BRUNSWICK COR COURT	3. Date of Earliest 02/03/2014	t Transactio	on (N	1onth/Day/	Year)	[	X Officer (give title below) Other (specify below) PRESIDENT - LIFE FITNESS				
LAKE FOREST, IL	4. If Amendment,	Date Origi	inal F	Filed(Month/I	Day/Year	r)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	etion V	4. Securiti (A) or Dis (Instr. 3, 4) Amount	posed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock		02/03/2014		А		5,300.00 (1)	А	\$ 40.44	20,187 ( <u>2)</u>	D	
Common Stock									145	Ι	By Svgs Plan Trustee

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

Persons who respond to the collection of information SEC 1474 (9contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.	Nun	nber	6. Date Exer	cisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n of	of and Expiration Date A		Amount of De		Derivative	Derivative	Ownership	of Indirect		
Security	or Exercise	(Month/Day/Year)	any	Code	D	Derivative (Month/Day/Year)		Unde	rlying	Security	Securities	Form of	Beneficial		
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Se	ecurit	ties	5		Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				A	cquir	red			(Instr	: 3 and			Security:	(Instr. 4)
	Security				(A	A) or				4)			Following	Direct (D)	
						ispos							· F · · · · ·	or Indirect	
						f (D)					Transaction(s)	< / <			
						nstr.	· · ·					(Instr. 4)	(Instr. 4)		
					4,	4, and 5)									
											Amount				
								Date	Evaluation		or				
								Exercisable	Expiration Date	Title	Number				
								Excicisable	Date		of				
				Code V	' ( <i>I</i>	A) (	(D)				Shares				

## **Reporting Owners**

	Relationships									
Reporting Owner Name / Address	Director	10% Owner	Officer	Other						
Clawson Christopher E BRUNSWICK CORPORATION 1 N FIELD COURT LAKE FOREST, IL 60045			PRESIDENT - LIFE FITNESS							

## Signatures

By: Power of Attorney For: /s/ Christopher Clawson ----Signature of Reporting Person

02/05/2014 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) Restricted stock granted under the 2003 Stock Incentive Plan with right to have shares withheld to pay income taxes on lapse of restrictions.

(2) Beneficial holdings include 31 shares acquired pursuant to dividend reinvestment in 2013.

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.