FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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INITIAL STATEMENT OF 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 Ad Tahinos P	. Date of Event lequiring Stater Month/Day/Yea	ment	3. Issuer Name and Ticker or Trading Symbol LINCOLN EDUCATIONAL SERVICES CORP [LINC]								
(Last) (First) (Middle)			02/24/2017		4. Relationship of Reporting Per (Check all applicable)		, ,		5. If Amendment, Date of Original Filed (Month/Day/Year)		
C/O LINCOLN EDUCATIONAL SERVICES CORPORA 200 EXECUTIVE DR., STE 340					X	Officer (give title below) SVP of Market	10% Owner Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) WEST ORANGE	NJ	07052								Form filed b Reporting P	y More than One erson
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4) Geneficially Owned (Instr. 4) Geneficially Owned (Instr. 5) 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		t (D)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock						50,000	D				
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 Secu Underlying Derivative Secu 4)		rity (Instr. Conv		5. Ownership Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiration Date	1 Title		Amount or Number of Shares	Exerc Price Deriva Secur	of ative	Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

/s/ Peter Tahinos

03/06/2017

** Signature of Reporting Person

Date

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

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.

^{*} 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).