## Edgar Filing: O SULLIVAN MICHAEL B - Form 4

O SULLIVA Form 4	AN MICHAEL	ЪВ									
April 14, 20	10										
FORM	ЛЛ								OMB AF	PROVAL	
	UNIII	ED STATE:		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
	Check this box if no longer									January 31, 2005	
In the tolger subject to Section 16.STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP SECURITIES							NERSHIP OF	Estimated average burden hours per			
Form 4 c Form 5			Castion 1	(a) = f + b		ing F		- A -t -f 1024	response	0.5	
obligatio may com <i>See</i> Instr 1(b).	tinue. Section	17(a) of the		tility Hold	ling Con	npany	Act of	e Act of 1934, E 1935 or Section 40	n		
(Print or Type ]	Responses)										
1. Name and Address of Reporting Person <u>*</u> O SULLIVAN MICHAEL B			2. Issuer Name <b>and</b> Ticker or Trading Symbol ROSS STORES INC [ROST]				ıg	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (C				(Chec)	eck all applicable)			
, <i>,</i> ,	EWOOD DRIV	. ,	(Month/E 04/12/2	ay/Year)				Director X Officer (give below) President,			
				4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
PLEASAN	TON, CA 945	88							Iore than One Re		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deeme Execution 2 any (Month/Day/Year)		on Date, if	1			d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
				Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	04/12/2010			F	7,422	D	\$ 56.01	212,889	D		

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.

 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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1 B	Director	10% Owner	Officer	Other			
O SULLIVAN MICHAEL B 4440 ROSEWOOD DRIVE, BUILDING 4 PLEASANTON, CA 94588			President, Chief Operating Off				
Signatures							
/s/Michael B O'Sullivan President, Chief Opera Officer	ating	04/13/2010					
**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).

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.