| ROSS STORES IN<br>Form 5<br>March 02, 2015  | С            |   |   |  |                          |  |  |  |  |
|---|--------------|---|---|--|--------------------------|--|--|--|--|
| FORM 5  |              |   |   | OMB AP                                 | PROVAL                   |  |  |  |  |
|   | UNITED STATE | OMB<br>Number:<br>Expires:  | 3235-0362<br>January 31,<br>2005  |  |                          |  |  |  |  |
| to Section 16.<br>Form 4 or Form<br>5 obligations<br>may continue.<br>See Instruction   | ANNUAL ST    | TATEMENT OF CHANGES IN BEN<br>OWNERSHIP OF SECURITIES   | NEFICIAL  | Estimated a<br>burden hour<br>response | verage                   |  |  |  |  |
| Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>Reported 30(h) of the Investment Company Act of 1940<br>Transactions<br>Reported |              |   |   |  |                          |  |  |  |  |
| 1. Name and Address o<br>GARRETT SHAR   | · ·          | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>ROSS STORES INC [ROST]                       | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable) |  |                          |  |  |  |  |
| (Last) (Fir<br>5130 HACIENDA  |              | <ul><li>3. Statement for Issuer's Fiscal Year Ended<br/>(Month/Day/Year)</li><li>01/31/2015</li></ul> | _X_ Director<br>Officer (give t   | 10%                                    | )<br>Owner<br>r (specify |  |  |  |  |
|   |              |   | ,   | ,                                      |                          |  |  |  |  |
| (Str  | eet)         | 4. If Amendment, Date Original Filed(Month/Day/Year)  | 6. Individual or Joi<br>(check  | -                                      |                          |  |  |  |  |
| DUBLIN Â CAÂ 9  | 04568        |   |   |  |                          |  |  |  |  |

## DUBLIN, CAÂ 94568

\_X\_ Form Filed by One Reporting Person \_\_\_\_ Form Filed by More than One Reporting Person

| (City)                               | (State) (Z                              | Zip) Table  | e I - Non-Deri                          | vative Sec  | curitie                                  | s Acqui | ired, Disposed o   | f, or Beneficial   | ly Owned  |
|--------------------------------------|---|---|---|---|--|---------|--|--|---|
| 1.Title of<br>Security<br>(Instr. 3) | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 3.<br>Transaction<br>Code<br>(Instr. 8) | 4. Securi<br>Acquired<br>Disposed<br>(Instr. 3,<br>Amount | l (A) o<br>l of (D<br>4 and<br>(A)<br>or | )       | 5. Amount of<br>Securities<br>Beneficially<br>Owned at end<br>of Issuer's<br>Fiscal Year<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
| Common<br>Stock                      | 05/28/2013                              | Â   | G5                                      | 2,415   | D  | \$0     | 5,767  | D  | Â   |
| Common<br>Stock                      | 05/27/2014                              | Â   | G                                       | 2,017   | D  | \$0     | 3,750  | D  | Â   |
| Common<br>Stock                      | 05/28/2013                              | Â   | G5                                      | 2,415   | А  | \$0     | 60,541   | Ι  | by Trust (1)  |
| Common<br>Stock                      | 05/27/2014                              | Â   | G                                       | 2,017   | А  | \$0     | 62,558   | I  | by Trust (1)  |

## Edgar Filing: ROSS STORES INC - Form 5

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. SEC 2270 (9-02)

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

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

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transaction<br>Code<br>(Instr. 8) | 5.<br>Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, | ;                   |                    | Secur | unt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) |  |
|---|---|---|---|--|---------------------|--------------------|-------|--|---|--|
|   |   |   |   | 4, and 5)<br>(A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

| Reporting Owner Name / Address                              | Relationships |           |         |       |  |  |  |
|---|---------------|-----------|---------|-------|--|--|--|
| 1 8   | Director      | 10% Owner | Officer | Other |  |  |  |
| GARRETT SHARON D<br>5130 HACIENDA DRIVE<br>DUBLIN, CA 94568 | ÂX            | Â         | Â       | Â     |  |  |  |
| Signatures  |               |           |         |       |  |  |  |
| /s/John Call for Sharon<br>Garrett                          | 03/02         | 2/2015    |         |       |  |  |  |
| **Signature of Reporting Person                             | D             | ate       |         |       |  |  |  |

## **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) Securities held in the name of Sharon D. Garrett Living Trust

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.