FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 ar | RO | 2. Issuer Name and Ticker or Trading Symbol ROSS STORES INC [ROST] | | | | | | | | | | all app Direc | plicable) ctor | | Person(s) to Issuer | | | | | | |
|--|--|--|---|--|---|---------------------------|---|-----|--------------------------------------|--|---|--|---------------------------------------|-----------------|---|--------------------------------------|--|--|--|---|--|
| (Last) | (Fir | (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/14/2017 | | | | | | | | | belov | Officer (give title below) | | Other (specify below) | | |
| 5130 HA | | | | | | | | | | | | Pr | President, Merchandising | | | | | | | | |
| (Street) | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | | | | |
| DUBLIN | • | | | | | | | | | | | | | | | X Form filed by One Reporting Person | | | | | |
| (City) | (State) (Zip) | | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | |
| (Oity) | (518 | | | | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | | | Execution Date, | | | Transaction Disposed Code (Instr. 5) | | | ities Acquired (A) d Of (D) (Instr. 3, | | | , 4 and Sec Ber Ow | | Amount of ecurities eneficially wined ollowing | | vnership n: Direct r ect (I) r. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | Amount | | A) or D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | (| | (111501. 4) | | | | | |
| Common | 017 | | | | Α | | 20,643 | (1) | A | \$ <mark>0</mark> | | 127,905 | | | D | | | | | | |
| Common Stock 03/14/20 | | | | | | | | | F | | 3,189 | | D | \$67.28 | | 8 124,716 | | | D | | |
| | 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) | ve Conversion Date y or Exercise (Month/Day/Year) if any | | 4. Transaction Code (Instr. 8) | | of Deriv Secu Acqu (A) o Dispo | r osed) r. 3, 4 | Expiration Da (Month/Day/Y | | tte ear) Expiration | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amou or Numb of Title Share: | | ount mber | 8. Pr of Deriv Secu (Inst | vative irity | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Or For Or (I) | wnership orm: irect (D) r Indirect) (Instr. | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

1. Shares issued pursuant to settlement of a performance share award under the terms of the 2008 Equity Incentive Plan. Shares become vested as follows: 6,193 shares vest as of March 14, 2017, 6,193 shares vest as of March 12, 2018, and 8,257 shares vest as of March 12, 2019.

/s/ Ken Jew for Brian Morrow 03/16/2017

** Signature of Reporting Person Date

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

- * 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.