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 and Address of Reporting Person [*] Brautigan Bernard G.				2. Issuer Name and Ticker or Trading Symbol <u>ROSS STORES INC</u> [ROST]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) 5130 HA	(Last) (First) (Middle) 5130 HACIENDA DRIVE				Earliest Tra	insaction	(Mon	th/Day/Year)		X O	fficer (give title elow)	Other	Other (specify below)		
(Street) DUBLIN CA 94568 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)							ine) X F	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1. Title of Security (Instr. 3) Date (Month/Day/Ye				/ear) Execu	zA. Deemed Execution Date, if any (Month/Day/Year)		tion nstr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			nd 5) Se Be Ov	Amount of curities neficially med llowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							v	Amount	(A) or (D)	Price	Re Tr	ported ansaction(s) str. 3 and 4)	(11501.4)	(
Common Stock 03/20			03/20/20	15		S		1,803	D	\$107.	36(1)	141,883	D		
Common Stock 03/23/201				15		S		28,197	D	\$107.:	53(2)	113,686	D		
		Та	ble II - Derivat (e.g., pr				•	oosed of, convertib			-	ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Brico of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yoar)	4. 5. Number Transaction Code (Instr. Derivative		Expirate (Mont	Expiration Date			tle and 8. Propunt of 0 of		9. Number of derivative ve Securities	Ownership Form:	11. Nature of Indirect Beneficial	

Security (Instr. 3)	or Exercise	Date (Month/Day/Year)	 8)		1 · · · · · · · · · · · · · · · · · · ·		Expiration Date (Month/Day/Year)		Amount or Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative	derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The price reported is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$107.35 to \$107.39, inclusive. The reporting person undertakes to provide to Ross Stores, Inc., any security holder of Ross Stores, Inc., and to the staff of the Securities and Exchange Commission upon request, full information regarding the numbers of shares sold at each separate price within this price range.

2. The price reported is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$107.40 to \$108.085, inclusive. The reporting person undertakes to provide to Ross Stores, Inc., any security holder of Ross Stores, Inc., and to the staff of the Securities and Exchange Commission upon request, full information regarding the numbers of shares sold at each separate price within this price range.

/s/ John C	all for	Bern	ard	
Brautigan	L			
** • •			_	

03/24/2015

** 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.