## SEC Form 4

## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

1. Name and Address of Reporting Person*  2. Issuer Name and Ticker or Trading Symbol  5. Relationship of Reporting Person(s) to Issuer    MILLIGAN STEPHEN D	1. Title of Security (Instr. 3) 2. Transacti				2A. Deemed	3.	4. Securities Acquired (A	A) or	5. Amount of	6. Ownership	7. Nature	
MILLIGAN STEPHEN D    MILLIGAN STEPHEN D    (Last)  (First)    (Last)  (First)    (Street)    DUBLIN  CA    Other    (City)  (State)    (Zip)    Rule 10b5-1(c) Transaction Indication    City (City)    (State)    (Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
MILLIGAN STEPHEN D  ROSS STORES, INC. [ ROST ]  (Check all applicable)  X  Director  10% Owner    (Last)  (First)  (Middle)  05/22/2024  05/22	(City)	(State)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to							
MILLIGAN STEPHEN D  ROSS STORES, INC. [ ROST ]  (Check all applicable)  X  Director  10% Owner    3. Date of Earliest Transaction (Month/Day/Year)  05/22/2024  05/22/2024  Other (specify below)  0ther (specify below)	l , ,	СА	94568					l '	Form filed by Mo			
MILLIGAN STEPHEN D  ROSS STORES, INC. [ ROST ]  (Check all applicable)  X  Director  10% Owner    3. Date of Earliest Transaction (Month/Day/Year)  0 fficer (give title  Other (specify	5130 HACIENDA DRIVE		4. If A	mendment, Date of	Original Filed	I (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable					
MILLIGAN STEPHEN D (Check all applicable)	(Last) (First) (Middle)				iction (Month/	Day/Year)						
						0		(Check all applicable)				

1. Title of Security (Instr. 3)	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (Instr.		Disposed Of (D) (Instr. 3, 4 and			Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock	05/22/2024		A		1,293(1)	Α	\$ <u>0</u>	20,813	D		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Shares issued under the terms of the 2017 Equity Incentive Plan. Shares become vested as follows: 1/3 on May 27, 2025, 1/3 on May 27, 2026, and 1/3 on May 27, 2027.

<u>/s/ Ken Je</u>	w for Stephen D.	05/24/2024
<u>Milligan</u>	-	05/24/2024

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.

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

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	hours per response:	0.5
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