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

| Name and Address of Reporting Person* QUESNEL GREGORY L | | | | | | 2. Issuer Name and Ticker or Trading Symbol ROSS STORES INC [ROST] | | | | | | | | | ionship of Reporting I all applicable) Director | | , | Person(s) to Issuer 10% Owner | |
|--|--|--|-------------|--|--|--|---------|---|---|------------|--|---|-------|---|---|---|--|--|--|
| (Last) (First) (Middle) 5130 HACIENDA DRIVE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/03/2016 | | | | | | | | | Office | er (give title w) | Other below | (specify v) | |
| 5150 HACIENDA DRIVE | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | · · | | | | | | | | | | | | | X Form filed by One Reporting Person | | | | | |
| DUBLIN | CA | A 94568 | | | | | | | | | | | | | Form Pers | • | e than One Re | porting | |
| (City) | (Sta | ate) (Z | e) (Zip) | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| Date | | | | 2. Transaction Date (Month/Day/Ye | Execution | | n Date, | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 | | | and 5) Secu Bene Own | | ficially | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | c | ode | v | Amount | (A) or (D) | Price | Re Tr | | rted saction(s) . 3 and 4) | (111341. 4) | (111341. 4) | |
| Common | 10/03/2010 | 5 | | | S | | 16,000 | D | \$64.388 | 64.3885(1) | | 19,370 | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Exe if a | Deemed ecution Date, iny onth/Day/Year) | | ssaction e (Instr. Derivativ Securitie Acquirec (A) or Disposet of (D) (Instr. 3, and 5) | | | Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount of Number of Shares | | of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. The price reported is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$64.305 to \$64.53, 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 Call for Gregory Quesnel

10/05/2016

** 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.