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| BJORKLAND K GUNNAR Form 4 March 27, 2013 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). | | | | | | | | | | | |
|--|---|---|-----------|--|---|---------|---------------------|--|---------------------------------------|-------------------------|--|
| (Print or Type | Responses) | | | | | | | | | | |
| BJORKLAND K GUNNAR Symbol | | | | er Name and Ticker or Trading STORES INC [ROST] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | | e of Earliest Transaction h/Day/Year) 7/2013 | | | | (Check all applicable) <u>X</u> Director Officer (give title10% Owner below) Other (specify below) | | | |
| Filed(Mo | | | | nendment, Date Original fonth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| PLEASANTON, CA 94388 Person | | | | | | | | | | | |
| (City) | (State) | (Zip) | | on-I | | | - | ired, Disposed of, | | • | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | ansaction Date 2A. Deemed th/Day/Year) Execution Date, if any (Month/Day/Year) | | | 4. Securit pror Dispos (Instr. 3, 4 Amount | ed of (| (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | Ownership Indirect Form: Beneficia | Beneficial Ownership | |
| Common Stock | 03/27/2013 | | Code M | | 16,188 | A | \$ 16.385 | 32,098 | D | | |
| Common Stock | 03/27/2013 | | S | | 16,188 | D | \$ 60.023 (1) | 15,910 | D | | |
| Common Stock | 03/27/2013 | | М | | 18,702 | А | \$ 13.77 | 34,612 | D | | |
| Common Stock | 03/27/2013 | | S | | 18,702 | D | \$ 60.023 (1) | 15,910 | D | | |

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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.

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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. Number of orDerivative Securities Acquired (A) or Disposed o (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amour Underlying Securit (Instr. 3 and 4) | |
|---|---|---|---|--|---|--|--------------------|--|---------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amo or Num of Sh |
| Non-Qualified Stock Option (right to buy) | \$ 13.77 | 03/27/2013 | | М | 18,702 | (2) | 05/18/2016 | Common Stock | 18,7 |
| Non-Qualified Stock Option (right to buy) | \$ 16.385 | 03/27/2013 | | М | 16,188 | (2) | 05/24/2017 | Common Stock | 16,1 |

Reporting Owners

| Reporting Owner Name / Address | 5 | Relationships | | | | | | |
|---|-----------|---------------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| BJORKLAND K GUNNAR 4440 ROSEWOOD DR. BUILDING 4 PLEASANTON, CA 94588 | Х | | | | | | | |
| Signatures | | | | | | | | |
| /s/Gunnar | 3/27/2013 | | | | | | | |

Bjorklund <u>**</u>Signature of Date Reporting Person

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) Range of prices: \$60.00 \$60.13.
- (2) Grant to reporting person of an option which begins vesting six months from grant date ('Initial Vest Date'). On Initial Vest Date, grant vests and becomes exercisable as to 1/6 of shares granted and then vests and becomes exercisable as to 1/36 of shares granted per month

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thereafter.

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