Edgar Filing: FIVE BELOW, INC - Form 4

FIVE BELOV	W, INC												
Form 4													
June 23, 2016)												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									-	OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287				
Check this box								Expires:	January 31,				
if no longer subject to STATEMENT OF CHANC					GES IN BENEFICIAL OWN				NERSHIP OF	Estimated a	2005 average		
Section 16									burden hours per				
Form 4 or Form 5								response					
obligation	_ ^							-	ge Act of 1934,				
may contin	Section 17			•		•			f 1935 or Sectio	n			
See Instru	ction	30(h)	of the Inv	vestmen	it C	Company	Act	of 19	40				
1(b).													
(Print or Type R	esponses)												
× •••													
1. Name and Address of Reporting Person [*] _ 2. Issuer Name and Ticker or Trading 5. Relationship of 1.							Reporting Person(s) to						
RYAN THOMAS M Symbol				ELOW, INC [FIVE]				C	Issuer				
									(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Cnec	leck all applicable)				
(Month/Da				ay/Year)					X Director	10%	b Owner		
C/O FIVE BELOW, INC., 1818 06/21/20)16			Officer (give title Other (specify below) below)					
MARKET S	TREET, SUITI	E 2000							below)	below)			
(Street) 4. If Amen			ndment, Date Original					6. Individual or Joint/Group Filing(Check					
			Filed(Mon	th/Day/Yea	ar)				Applicable Line)				
									X Form filed by (Form filed by N	One Reporting Pe Iore than One Re			
PHILADELI	PHIA, PA 1910)3							Person		porting		
(City)	(State)	(Zip)	Table	e I - Non-	De	rivative S	ecuri	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction D	ate 2A. Dee	emed	3.		4. Securit	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yea		on Date, if		tio	nAcquired			Securities	Form: Direct	Indirect		
(Instr. 3)			any (Month/Day/Year)		CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				Beneficially Owned		Beneficial Ownership		
		``	,, (× ,		·	Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported				
							or		Transaction(s) (Instr. 3 and 4)				
C				Code	V	Amount	(D)	Price	(
Common Stock	06/21/2016			А		1,955	А	\$0	173,891	D			

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)

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1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. 6. Date Exercisable ionNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amo Unde Secur	tle and unt of vrlying rities : 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
Repo	orting C	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

S

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
RYAN THOMAS M C/O FIVE BELOW, INC. 1818 MARKET STREET, SUITE 2000 PHILADELPHIA, PA 19103	X			
Signatures				
/s/ Maureen Mulligan, as Attorney-In-Fac Ryan	06/23/2016			
<u>**</u> Signature of Reporting Person	Date			

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).

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.