### Edgar Filing: BED BATH & BEYOND INC - Form 4

	& BEYOND IN	IC									
Form 4 May 12, 201	5										
•									OMB AF	PROVAL	
FORM	<b>4</b> UNITED	STATES		RITIES A shington			ANGE C	OMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section				GES IN SECUE	BENEF RITIES ne Securi	TCIA ties H	Exchange	Act of 1934,	Expires: Estimated a burden hour response	urs per	
obligatio may cont <i>See</i> Instr 1(b).	tinue. Section 17		Public U of the In	•	•	-	•	1935 or Sectior	1		
(Print or Type ]	Responses)										
STARK ARTHUR Symbol BED E			Symbol	er Name <b>and</b> Ticker or Trading BATH & BEYOND INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
				of Earliest Transaction Day/Year)				Director       10% Owner         Officer (give title below)       Other (specify below)         President and CMO			
			endment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> <li>Person</li> </ul>				
(City)	(State)	(Zip)	Tabl	e I - Non-l	Derivative	Secu	rities Acqu	ired, Disposed of,	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			(A)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Stock, par value \$0.01 per share	05/10/2015			F	7,323 (1)	D	\$ 71.53	148,456	D		
Common Stock, par value \$0.01 per share	05/11/2015			F	3,661 (1)	D	\$ 70.955	144,795	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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Da	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities	5		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A		
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
					(A) (D)				of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
Reporting Owner Funct, Futuress	Director	10% Owner	Officer	Other			
STARK ARTHUR C/O BED BATH & BEYOND INC. 650 LIBERTY AVENUE UNION, NJ 07083			President and CMO				
Signatures							
/s/ Charles Lee, Attorney-in-fact	05/12/202	15					

<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).
- (1) Represents the surrender of shares to the Company to satisfy Mr. Stark's tax withholding obligation upon the vesting of shares of restricted stock previously granted to Mr. Stark.

#### **Remarks:**

#### Remarks: Exhibit 24 - Power of Attorney

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.

### **Reporting Owners**