Edgar Filing: BED BATH & BEYOND INC - Form 4

| Check this box if no longer subject to Section 16. SECURITIES Number: Number: January 31 2005 burden hours per | | | | | | | | | 3235-0287 January 31, 2005 verage | | |
|--|------------|---|-----|---|-----------------|----------|------------------------------|--|---|---|--|
| (Print or Type R | lesponses) | | | | | | | | | | |
| Gaston Patrick Symbol | | | | BATH & BEYOND INC | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| | | | | of Earliest Transaction /Day/Year) /2016 | | | | X_Director10% Owner Officer (give titleOther (specify below) below) | | | |
| | | | | nendment, Date Original onth/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 | | | |
| (City) | (State) | (Zip) | Tab | le I - Non-D | Derivative | Secu | rities Acau | Person uired, Disposed of, | or Beneficiall | v Owned | |
| 1.Title of Security (Instr. 3) | | unsaction Date 2A. Deemed th/Day/Year) Execution Date, if any (Month/Day/Year) | | 3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or | | | cquired d of (D) 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock, \$.01 par value per share | 02/27/2016 | | | Code V | Amount 1,190 | (D) A | Price \$ 46.225 (1) | 17,539 | D | | |

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

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 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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|---|---------------------|--------------------|-------|--|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|--|
| Reporting Owner Paulie / Pauless | Director | 10% Owner | Officer | Other | | | | |
| Gaston Patrick C/O BED BATH & BEYOND INC. 650 LIBERTY AVENUE UNION, NJ 07083 | х | | | | | | | |
| Signatures | | | | | | | | |
| /s/ Charles Lee, Attorney-in-Fact | 03/01/2016 | | | | | | | |
| **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).

\$55,000 of Mr. Gaston's director fees for the fiscal year ended February 27, 2016 were paid in Common Stock of the Company pursuant to the Bed Bath & Beyond Plan to Pay Directors Fees in Stock (the "Plan") adopted by the Company. The number of shares was

(1) to the Bed Bain & Beyond Han to Fay Directors rees in stock (the Fhan) adopted by the company. The number of shares was determined based on a price of \$46.225 per share, the average of the high and low trading prices on January 11, 2016, the second business day following the announcement of the Company's financial results for its fiscal third quarter, as provided by the terms of the Plan.

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.