## Edgar Filing: FIVE BELOW, INC - Form 4

FIVE BELOV	W, INC										
Form 4											
March 09, 20	17										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								• • • • • •	OMB APPROVAL		
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549							OMB Number:	3235-0287			
Check this								Expires:	January 31,		
if no long subject to		ENT OF CHAN	CHANGES IN BENEFICIAL OWN				NERSHIP OF		2005		
Section 10		SECURITIES						Estimated average burden hours per			
Form 4 or								response	•		
Form 5 obligation	· ·	uant to Section 1				U					
may conti	Section 17(a	) of the Public Ut	•	•	• •			n			
See Instru	ction	30(h) of the In	vestment	Company	Act	of 194	40				
1(b).											
(Print or Type R	(esponses)										
1. Name and A	ddress of Reporting P	erson <u>*</u> 2. Issuer	r Name <b>and</b>	Ticker or T	Frading	z	5. Relationship of	Reporting Person(s) to			
Anderson Jo	Symbol	-				Issuer					
	FIVE B	VE BELOW, INC [FIVE]						、 、			
(Last)	(First) (M	(iddle) 3. Date of	f Farliest Tr	ansaction	-		(Chec	k all applicable	e)		
()	()	,	Date of Earliest Transaction Ionth/Day/Year)			X_ Director 10% Owner					
C/O FIVE B	ELOW INC., 181	· ·	•				XOfficer (give		er (specify		
MARKET S	TREET, SUITE 2	2000					below) Pre	below) sident & CEO			
	(Streat)	4 10 4	1 ( D )								
			If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
		riieu(Moi	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
PHILADEL	PHIA, PA 19103							Iore than One Re	eporting		
							Person				
(City)	(State) (	Zip) Tabl	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Date	2A. Deemed	3.				5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution Date, if		on(A) or Di	sposed	of	Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5)					Beneficial Ownership			
		(1121111224), 1041)	(1115111-0)	(11154170)	. uno c	· )	Following	(Instr. 4)	(Instr. 4)		
					(A)		Reported				
					or		Transaction(s) (Instr. 3 and 4)				
~			Code V	Amount	(D)	Price	(mout 5 and 4)				
Common Stock	03/07/2017		А	13,123	А	\$0	79,348	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)	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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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						
	Director 10% Owne		Officer	Other			
Anderson Joel D C/O FIVE BELOW INC. 1818 MARKET STREET, SUITE 2000 PHILADELPHIA, PA 19103	Х		President & CEO				
Signatures							
/s/ Maureen Mulligan, as Attorney-In-Fact Anderson	for Joel D.		03/09/2017				
**Signature of Reporting Person			Date				
Explanation of Responses:							

## 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.