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Romanko Mi	ichael										
Form 4	10										
March 19, 20											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	UTTE			hington,					Number:	3235-0287	
Check thi					200120				Expires:	January 31,	
if no longer subject to STATEMENT OF C				CHANGES IN BENEFICIAL OW				NERSHIP OF		2005	
Section 16. SECURI					RITIES			Estimated average burden hours per			
Form 4 or								response	•		
Form 5	Filed p	ursuant to S	Section 16	6(a) of the	e Securiti	es Ex	cchang	ge Act of 1934,			
obligatior may conti	Section 1			•	•			of 1935 or Sectio	n		
See Instru		30(h)	of the Inv	vestment	Compan	y Act	of 19	40			
1(b).											
(Print or Type P	Pasnonsas)										
(Print or Type R	(esponses)										
1. Name and A	ddress of Reportin	g Person *	2 Issuer	Name and	Ticker or '	Fradin	σ	5. Relationship of	Reporting Person(s) to		
Romanko M	2. Issuer Name and Ticker or Trading Symbol				5	Issuer					
	FIVE BELOW, INC [FIVE]										
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Check all applicable)			
(Last)	(1130)	(winduic)			alisaction			Director	10%	6 Owner	
				(Month/Day/Year) 03/16/2019				Difference (give title Other (specify below) below)			
MARKET S	00/10/20	05/10/2017					below) of Merchandisii	ng			
	(6,)		4 70 1							-	
(Street)				4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Year))			Applicable Line) _X_ Form filed by	One Reporting Pe	erson	
PHILADEL	PHIA, PA 1910	06						Form filed by M			
								Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction D	Date 2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea	ar) Execution	on Date, if	TransactionAcquired (A) or					Form: Direct	Indirect	
(Instr. 3)		-	any (Month/Day/Year)		CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			· · · ·	D) or Beneficial Indirect (I) Ownership	Beneficial Ownership	
		(WOIIII)	Day/Teal)	(11150. 0)	(iiisu. <i>3</i> ,	4 anu	3)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported	. ,	. ,	
						or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	03/16/2019			А	1,068	А	\$0	14,005	D		

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

Stock

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)

Security Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) Amount or Date Expiration Title Number Exercisable Date of Code V (A) (D) Shares **Reporting Owners** Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other

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4.

Code

(Instr. 8)

Execution Date, if

(Month/Day/Year)

5.

of

Derivative

Securities

EVP of Merchandising

TransactionNumber

6. Date Exercisable and

Expiration Date

(Month/Day/Year)

7. Title and

Amount of

Underlying

(Instr. 3 and 4)

Securities

8. Price of

Derivative

Security

(Instr. 5)

9. Nt

Deriv

Secu

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Own

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Repo

Trans

(Insti

Romanko Michael C/O FIVE BELOW INC. 701 MARKET STREET, SUITE 300 PHILADELPHIA, PA 19106

Signatures

1. Title of

Security

(Instr. 3)

Derivative

2.

Conversion

or Exercise

Derivative

Price of

/s/ Ronald J. Masciantonio, Attorney-In-Fact	03/19/2019	
<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).

3. Transaction Date 3A. Deemed

any

(Month/Day/Year)

** 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.