AMERICAN EAGLE OUTFITTERS INC Form SC 13G February 09, 2016

SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549

SCHEDULE 13G

INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT TO RULES 13d-1(b), (c), AND (d) AND AMENDMENTS THERETO FILED PURSUANT TO RULE 13d-2

(AMENDMENT NO.)*

American Eagle Outfitters, Inc.

(Name of Issuer)

Common Shares

(Title of Class of Securities)

02553E106

(CUSIP Number)

12/31/15

(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

Х	Rule 13d-1(b)
0	Rule 13d-1(c)
0	Rule 13d-1(d)

*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

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CUSIP NO. 02553E106	13G	Page 2 of 4 Pages
1. NAM	ME OF REPORTING PERS	SONS
Massachusetts Financial Services Company ('	'MFS")	
2. CHECK THE APPR (SEE INSTRUCTIONS)	OPRIATE BOX IF A MEM	IBER OF A GROUP
a) o (b) o		
Not Applicable		
3.	SEC USE ONLY	
4. CITIZENS	HIP OR PLACE OF ORGA	NIZATION
Delaware		
NUMBER OF SHARES BENEFICIALLY O	WNED BY EACH REPOR	TING PERSON WITH:
5.	SOLE VOTING POWER	
12,650,494 common shares		
6.	SHARED VOTING POWE	R
None		
7. S	OLE DISPOSITIVE POWI	ER
13,414,382 common shares		
8. SH	ARED DISPOSITIVE POW	WER
None		
9. AGGREGATE AMOUNT BEN	EFICIALLY OWNED BY	EACH REPORTING PERSON
13,414,382 common shares, consisting of sha entities.	res beneficially owned by M	/IFS and/or certain other non-reporting
10. CHECK IF THE AGGREGATE AMOUN INSTRUCTIONS)	T IN ROW (9) EXCLUDE	S CERTAIN SHARES (SEE
Not Applicable		

11. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0

12. TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)

IA

6.9

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Schedu	ıle 13G		Page 3 of 4 Pages		
ITEM	1:	(a)	NAME OF ISSUER:		
See Co	over Page				
(b)	ADDRESS OF ISSUER'S PRINCIPAL EXECUTIVE OFFICES:				
	Metal Street rgh, PA 15203	3			
ITEM	2:	(a)	NAME OF PERSON FILING:		
See Ite	m 1 on page 2				
	(b)	ADDRESS OF PRINCIPA	AL BUSINESS OFFICE OR, IF NONE, RESIDENCE:		
	intington Aver , MA 02199	nue			
(c)	CITIZENSHIP:				
See Ite	m 4 on page 2				
(d)	TITLE OF CLASS OF SECURITIES:				
See Co	over Page				
(e)	CUSIP NUMBER:				
See Co	over Page				
ITEM Rule 1	3: 3d-1(b)(1)(ii)(i	· · ·	s an investment adviser in accordance with		
ITEM	4:		OWNERSHIP:		
(a)	AMOUNT BENEFICIALLY OWNED:				
See Ite	m 9 on page 2				
(b)	PERCENT OF CLASS:				
See Ite	m 11 on page	2			
(c)NI	IMBER OF SE		H DEDSON HAS VOTING AND DISPOSITIVE DOWE		

(c)NUMBER OF SHARES AS TO WHICH SUCH PERSON HAS VOTING AND DISPOSITIVE POWERS (SOLE AND SHARED):

See Items 5-8 on page 2

ITEM 5: OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS:

0

Not Applicable

Schedule 13G	Page 4 of 4 Pages			
ITEM 6:	OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON:			
Not Applicable				
ITEM IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH ACQUIRED THE 7: SECURITY BEING REPORTED ON BY THE PARENT HOLDING COMPANY OR CONTROL PERSON: Not Applicable				
ITEM 8:	IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP:			
	IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE OROUP.			
Not Applicable				
ITEM 9:	NOTICE OF DISSOLUTION OF GROUP:			
Not Applicable				
ITEM 10:	CERTIFICATIONS:			

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: February 9, 2016

Massachusetts Financial Services Company

By: /s/ DANIEL W. FINEGOLD Daniel W. Finegold Vice President and Assistant Secretary