Edgar Filing: Burlington Stores, Inc. - Form 4

| Burlington S Form 4 | tores, Inc. | | | | | | | | | | |
|---|-------------------------------------|--------------------------------|--|---|-----------|-----------|-------------------------------------|---|------------------------|---------------------|--|
| April 12, 201 | 17 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | OMB APPROVAL | | | |
| Washington, D.C. 20549 | | | | | | | COMMISSION | OMB Number: | 3235-0287 | | |
| Check thi if no long | r | | | | | | | | Expires: | January 31, 2005 | |
| subject to STATEMENT OF CHA | | | | ANGES IN BENEFICIAL OWN SECURITIES | | | | NERSHIP OF | Estimated average | | |
| | Section 16. Form 4 or | | | | 11125 | | | | burden hou response | rs per 0.5 | |
| Form 5 | | | | | | | | e Act of 1934, | · | | |
| obligation may cont | | | | | | | | 1935 or Section | 1 | | |
| <i>See</i> Instru 1(b). | action | 30(h) | of the In | vestment | Compan | у Ас | t of 194 | 0 | | | |
| (Print or Type F | Responses) | | | | | | | | | | |
| X7 L | | | | 2. Issuer Name and Ticker or Trading Symbol | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | Burlington Stores, Inc. [BURL] | | | | | (Check all applicable) | | | |
| (Last) | (First) | (Middle) | | Earliest Tr | ansaction | | | | | | |
| | | | | (Month/Day/Year) 04/10/2017 | | | | Director 10% Owner X Officer (give title Other (specify below) below) | | | |
| | | | | | | | | · · · · · · · · · · · · · · · · · · · | rchandising Of | ficer | |
| | | | 4. If Ame | Amendment, Date Original | | | | 6. Individual or Joint/Group Filing(Check | | | |
| | | | Filed(Mor | nth/Day/Year |) | | | Applicable Line) _X_ Form filed by One Reporting Person | | | |
| BURLINGT | CON, NJ 08016 | | | | | | | Form filed by M Person | | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Yea | ned n Date, if Day/Year) | 3. Transactic Code (Instr. 8) | 4. Securi on(A) or Di (Instr. 3, | spose | d of (D) | Securities Beneficially Owned | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| | | | | | | (A) or | | Transaction(s) (Instr. 3 and 4) | | | |
| Common | 04/10/2017 | | | Code V | | | Price \$ | | D | | |
| Stock | 04/10/2017 | | | F | 526 | D | 92.92 | 55,717 | 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)

Edgar Filing: Burlington Stores, Inc. - Form 4

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | unt of 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% Owner | Officer | Other | | | | |
| Vecchio Jennifer 2006 ROUTE 130 NORTH BURLINGTON, NJ 08016 | | | Chief Merchandising Officer | | | | | |
| Signatures | | | | | | | | |
| /s/ Christopher Schaub, as attorne Vecchio | r Jennifer | 04/12/2017 | | | | | | |
| <u>**</u> Signature of Reporting | ng 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).

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.