## Edgar Filing: HEACOCK THOMAS B - Form 4

HEACOCK '	THOMAS B											
Form 4												
February 05,	2018											
FORM		CECUD							PPROVAL			
<b>CURIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287				
Check thi							Expires:	January 31				
if no long subject to		EMENT O	F CHAN	GES IN I	<b>BENEFICIAL OWNERSHIP OF</b>				20			
Section 16. SECURITIES								Estimated average burden hours per				
Form 4 or							response 0.					
Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,												
may conti				•	•	• •		f 1935 or Sectio	n			
See Instru	iction	30(h)	) of the In	vestment	Company	Act	of 194	40				
1(b).												
(Print or Type R	Responses)											
	ddress of Reportin	ng Person <sup>*</sup>	2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to					
HEACOCK	THOMAS B		Symbol	Symbol					Issuer			
	BUCKLE INC [BKE]					(Check all applicable)						
(Last)	(First)	(Middle)	3. Date of Earliest Transaction									
2407 332 247				(Month/Day/Year)				_X_ Director 10% Owner _X_ Officer (give title Other (specify				
2407 W 24T	02/04/2018					below) below)						
								VP Financ	e, Treasurer an	d CFO		
	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person							
	Filed(Month/Day/Year)											
KEARNEY,	NF 68845							Form filed by I	More than One Re			
	, IL 000+5							Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acc	uired, Disposed o	f, or Beneficial	lly Owned		
1.Title of	2. Transaction D	Date 2A. Dee	emed	3.				5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye	· ·	on Date, if	Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5)			l of	Securities		Indirect		
(Instr. 3)		any (Month	/Day/Year)				5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		,	, , , , , , , , , , , , , , , , , , ,					Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
						or	р.	(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price					
Stock	02/04/2018			А	17,400	А	\$0	59,750	D			
Common Stock								10,312	Ι	By Wife		
STOCK												

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.

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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	Amou Unde Secur	le and unt of rlying tities . 3 and 4)	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						
	Director	10% Owner	Officer	Other			
HEACOCK THOMAS B 2407 W 24TH STREET KEARNEY, NE 68845	Х		VP Finance, Treasurer and CFO				
Signatures							
Karen B. Rhoads by Power of Attorney		02/05/2	018				

Date

<u>\*\*</u>Signature of Reporting Person

## **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.