## Edgar Filing: CASTAGNA EUGENE A - Form 4

CASTAGN	A EUGENE A											
Form 4												
May 13, 20	11											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB A	PROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287			
Check the check								Expires:	January 31,			
subject t Section	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated average burden hours per						
Form 4 Form 5									response	0.5		
obligation may con	biligations nay continue. <i>See</i> Instruction (a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> CASTAGNA EUGENE A			2. Issuer Name <b>and</b> Ticker or Trading Symbol BED BATH & BEYOND INC [BBBY]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (	, , , , , , , , , , , , , , , , , , , ,			Date of Earliest Transaction				Director 10% Owner X Officer (give title Other (specify			
C/O BED BATH & BEYOND INC., 650 LIBERTY AVENUE			(Month/Day/Year) 05/12/2011					below) below) CFO and Treasurer				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)				
UNION, NJ 07083			_					_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	e Secu	rities Acqu	uired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date any (Month/Day/Year)			Date, if	Date, if Transaction Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially Owned Following Reported Transaction(s)	OwnershipIndForm:BerDirect (D)Ow	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
~				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock, par value \$0.01 per	05/12/2011			F	1,659 (1)	D	\$ 55.9475	, 126,667	D			
share												

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 int of rlying ities . 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**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
CASTAGNA EUGENE A C/O BED BATH & BEYOND INC. 650 LIBERTY AVENUE UNION, NJ 07083			CFO and Treasurer				
Signatures							
/s/ Ori Solomon - Attorney-in-Fact	05/13/2	2011					
**Signature of Reporting 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).
- (1) Represents the surrender of shares to the Company to satisfy Mr. Castagna's tax withholding obligation upon the vesting of shares of restricted stock previously granted to Mr. Castagna.

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.