FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Chaya Eri				2. Issuer Name <b>and</b> Ticker or Trading Symbol  RH [ RH ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
(Last)	(First)	(1)	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/06/2018								X	Officer (g below)			Other (s below)	pecify	
C/O RH														See Remarks					
15 KOCH ROAD, SUITE K				4. If Amendment, Date of Original Filed (Month/Day/Year)							I	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person							
(Street)															•	•	ng Person ne Reportin	a Doroon	
CORTE MADERA	CA	9	4925											rominie	Dy More (	liiaii O	пе кероппі	g Person	
(City)	(State	•) (2	Ľip)																
		Т	able I - Non	n-Deriv	ative	Securitie	s Acq	μired, Γ	Disp	osed of	f, or Ben	efic	ially Ow	ned					
Date				2. Transa Date (Month/D		Execution if any	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr.		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and			5. Amount Securities Beneficially Following	y Owned or Ir Reported (Ins		: Direct (D) lirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amount	(A) or (D) Price		Price	Transaction(s) (Instr. 3 and 4)						
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)	Cod	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Securities Under Derivative Securi 3 and 4)		rlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction	s Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	e V	(A)	(D)	Date Exercisab		xpiration ate	Title		Amount or Number of Shares		(Instr. 4)	oii(s)			
Stock Option (Right to Buy)	\$109.87	06/06/2018		A		50,000		(1)	00	6/05/2028	Commor Stock	1	50,000	\$0.00	50,000	0	D		

## Explanation of Responses

1. This stock option award will vest and become exercisable over five years, such that such options shall vest together with other stock options held by the reporting person, as follows: 10% of the options will vest on each of the first and second anniversaries of the grant date, 20% of the options will vest on each of the third and fourth anniversaries of the grant date, and the remaining 40% will vest on the fifth anniversary of the grant date, subject to continuous service.

## Remarks:

President, Chief Creative Officer & Director

/s/ Edward T. Lee as Attorney-In-

Fact

\*\* Signature of Reporting Person

Date

06/08/2018

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

- $^{\star}$  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.

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 Number.