

RITE AID CORP  
Form 3/A  
January 04, 2016

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2015  
Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(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)

<p>1. Name and Address of Reporting Person *</p> <p>Â Konrad Jocelyn Z</p> <p>(Last) (First) (Middle)</p> <p>RITE AID CORPORATION,Â 30 HUNTER LANE</p> <p>(Street)</p> <p>CAMP HILL,Â PAÂ 17011</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>08/03/2015</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>RITE AID CORP [RAD]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below)</p> <p>EVP</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p> <p>08/03/2015</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person</p>
---	---	---	--	---	---

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	11,578 <sup>(1)</sup>	D	Â

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

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	--	---	---	--

Edgar Filing: RITE AID CORP - Form 3/A

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Non-Qualified Stock Option (right to buy) <sup>(2)</sup>	06/25/2010 <sup>(3)</sup>	06/25/2019	Common Stock	6,000	\$ 1.24	D	Â
Non-Qualified Stock Option (right to buy) <sup>(2)</sup>	06/27/2012 <sup>(3)</sup>	06/27/2021	Common Stock	33,100	\$ 1.24	D	Â
Non-Qualified Stock Option (right to buy) <sup>(2)</sup>	06/25/2013 <sup>(3)</sup>	06/25/2022	Common Stock	33,800	\$ 1.32	D	Â
Non-Qualified Stock Option (right to buy) <sup>(2)</sup>	06/24/2014 <sup>(3)</sup>	06/24/2023	Common Stock	13,500	\$ 2.76	D	Â
Non-Qualified Stock Option (right to buy) <sup>(2)</sup>	06/23/2015 <sup>(3)</sup>	06/23/2024	Common Stock	6,600	\$ 7.08	D	Â
Non-Qualified Stock Option (right to buy) <sup>(2)</sup>	06/24/2016 <sup>(3)</sup>	06/24/2025	Common Stock	11,600	\$ 8.68	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Konrad Jocelyn Z RITE AID CORPORATION 30 HUNTER LANE CAMP HILL, PA 17011	Â	Â	Â EVP	Â

## Signatures

/s/ Jocelyn Z  
Konrad  
01/04/2016

\*\*Signature of Reporting Person                      Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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) These shares were reported incorrectly from the reporting person's original Form 3, and also incorrect on the 1 Form 4 filed by the reporting person after her original Form 3 was filed.
- (2) These shares were omitted from the reporting person's original Form 3, and also were omitted from 1 Form 4 filed by the reporting person after her original Form 3 was filed.
- (3) The option vests in four equal annual installments beginning one year from the date of grant.

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.