FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Wash

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	OMB APPRO	VAL							
	OMB Number:	3235-0287							
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l	hours per response:	0.5							

	Check this box if no longer subject to
ì	Section 16. Form 4 or Form 5
J	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

1. Name and Address of Reporting Person* <u>Kaplan Steven H.</u>					2. Issuer Name and Ticker or Trading Symbol RBC Bearings INC [ROLL]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
				1	RDC Dearings 1110 [ROLL]									Director	or	10% Owner		vner			
(Last) (First) (Middle) 11 LINDEN SHORES						3. Date of Earliest Transaction (Month/Day/Year) 07/10/2018									Officer (give title below)			Other (s below)	specify		
					_ 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)												- 1	X Form filed by One Reporting Person								
BRANFORD CT 06405														Form filed by More than One Reporting							
(City) (State) (Zip)														Persor	1						
		Tak	le I - Nor	n-Deriv	vativ	e Se	curitie	s Ac	quired	, Dis	posed c	of, or	Ben	eficiall	y Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,		Code	Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	Amount (A) or (D)		Price	Reported Transact (Instr. 3	ported ansaction(s) str. 3 and 4)			(Instr. 4)			
Common Stock 07/10/					0/201	/2018		A		1,50	1,500 A		\$0	2,940(1)			D				
		-	Гable II -								osed of				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date, Transac Code (I					6. Date Exercisal Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Seci (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisal		Expiration Date	Title		Amount or Number of Shares							
Option to Purchase Common	\$128.24	07/10/2018			A		1,000		07/03/201	9(2)	07/03/2025	Comi		1,000	\$128.24	1,000)	D			

Explanation of Responses:

- 1. 1,500 shares of the reported Common Stock are Restricted Shares. The Restrictions lapse in accordance with the following schedule 1/3 vest on 7/3/2019, 1/3 vest on 7/3/2020, 1/3 vest on 7/3/2021. Unvested shares of Restricted Stock (i) may be immediately forfeited to the Company at the time the grantee ceases to be an officer or employee of, or otherwise perform services for, the Company or its subsidiaries under certain circumstances or (ii) may lapse upon the happening of certain events.
- $2. \ Options to purchase shares of Common Stock are subject to the following vesting schedule 1/5 vest on 7/3/2019, 1/5 vest on 7/3/2020, 1/5 vest on 7/3/2021, 1/5 vest on 7/3/2022 and 1/5 vest on 7/3/2023.$ Options expire 7 years from grant date

Remarks:

/s/Thomas J. Williams /attorney 07/12/2018 in fact

** Signature of Reporting Person Date

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

- * 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.