SEC For	rm 4																				
	FORM	4	UNITED STATES SECURITIES AND EXCHANGE COMM Washington, D.C. 20549															0145			
Section 16. Form 4 or Form 5 obligations may continue. See					ed purs	d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940										HIP	Esti	B Numb mated a	er: verage burde sponse:	3235-0287	
1. Name and Address of Reporting Person* Kaplan Steven H.						2. Issuer Name and Ticker or Trading Symbol <u>RBC Bearings INC</u> [ROLL]										elationship o eck all applio	able)	ng Pers	son(s) to Iss		
(Last) 11 LINE	(Last) (First) (Middle) 11 LINDEN SHORES				3. Date of Earliest Transaction (Month/Day/Year) 06/02/2020										Officer (give title Other (specify below) below)				specify		
(Street) BRANFORD CT 06405 (City) (State) (Zip)					4. 11	Line) X Form filed by (iled by Or iled by Mo	/Group Filing (Check Applicable by One Reporting Person by More than One Reporting			
		Tak	ole I - Noi	n-Deriv	ative	e Se	curitie	es Ac	cquired	l, Di	isp	osed o	f, or Be	nefi	ciall	y Owned					
Date				Date	2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year		3. Transaction Code (Instr. 8)		5)		str. 3,	4 and Securi Benefi Owned Report		ies For cially (D) Following (I) (ed		n: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock 06/02					2/202	/2020			Code	e V		Amount (A) or (D) 1,500 A		r P	rice \$0	Transaction(s) (Instr. 3 and 4) 5,940 ⁽¹⁾⁽²⁾		-	D		
Common	ISTOCK		Table II -	l Deriva	tive	Sec	urities	Aco	uired,	Dis	po	sed of,	or Ben	efici	ially				D		
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	utts, call 4. Transaction Code (Instr. 3)		5. Num	nber tive ties red sed 3, 4	6. Date E Expiratio (Month/D	xerci n Dat	sabi te		Die securitie 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		-	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securiti Benefici Owned Followir Reporte Transac (Instr. 4)	ve es ially ng d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v			Date Exercisa			xpiration ate	or		ount nber ıres						
Option to Purchase Common Stock	\$137.44	06/02/2020			A		1,000		06/02/202	02/2021 ⁽³⁾ (6/02/2027	Common Stock 1,0		000	\$0 1,		00	D		
Option to Purchase Common Stock	\$128.24								07/03/20	19 ⁽⁴⁾	07	7/03/2025	Common Stock	8	00		80	0	D		
Option to Purchase	\$158.48								08/19/202	20 ⁽⁵⁾	08	8/19/2026	Common	1,0	000		1,00	00	D		

Explanation of Responses:

Stock

1. Includes 3,500 shares of restricted stock, which vest according to the following schedule - 500 shares that vest on 7/3/2021; 1,500 shares 1/3 of which vest on 8/19/2020, 1/3 vest on 8/19/2021 and 1/3 vest on 8/19/2022; and 1,500 shares 1/3 of which vest on 6/2/2021, 1/3 vest on 6/2/2022 and 1/3 vest on 6/2/2023.

2. Prior From 4 filed on 11/7/2019 erroneously included 360 shares that were not owned by Mr. Kaplan.

3. These options to purchase Common Stock are subject to the following vesting schedule - 1/5 vest on 6/2/2021, 1/5 vest on 6/2/2022, 1/5 vest on 6/2/2023, 1/5 vest on 6/2/2024 and 1/5 vest on 6/2/2025.

4. All these options to purchase Common Stock are exercisable except for 600 options that are subject to the following vesting schedule - 1/3 vest on 7/3/2021, 1/3 vest on 7/3/2022 and 1/3 vest on 7/3/2023.

5. These options to purchase Common Stock are subject to the following vesting schedule - 1/5 vest on 8/19/2020, 1/5 vest on 8/19/2021, 1/5 vest on 8/19/2022, 1/5 vest on 8/19/2023 and 1/5 vest on 8/19/2024.

<u>/s/Joseph</u> <u>Salamunovich/attorney in fact</u>

07/10/2020

** 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.