

Amalfi Peter
Form 3
February 03, 2011

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

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2005
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)

| | | | | |
|---|--|--|--|---|
| 1. Name and Address of Reporting Person * ^ Amalfi Peter (Last) (First) (Middle) | | 2. Date of Event Requiring Statement (Month/Day/Year) 02/01/2011 | 3. Issuer Name and Ticker or Trading Symbol BJS WHOLESALE CLUB INC [BJ] | 5. If Amendment, Date Original Filed(Month/Day/Year) |
| 25 RESEARCH DRIVE (Street) | | (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) EVP, Chief Information Officer | | 6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person |
| WESTBOROUGH, MA 01581 (City) (State) (Zip) | | | | |

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 | 23,217 ⁽¹⁾ | D | ^ |

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 Security | 5. Ownership Form of Derivative Security: Direct (D) or Indirect | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|---|--|--|--|--|
| | Date Exercisable Expiration Date | Title Amount or Number of | | | |

Edgar Filing: Amalfi Peter - Form 3

| | | | | Shares | | (I) (Instr. 5) | |
|-----------------------|-------|------------|--------------|--------|----------|-------------------|---|
| Option (Right to buy) | Â (2) | 05/24/2016 | Common Stock | 3,900 | \$ 29.68 | D | Â |
| Option (Right to buy) | Â (3) | 05/26/2015 | Common Stock | 7,500 | \$ 30.11 | D | Â |
| Option (Right to buy) | Â (4) | 09/29/2014 | Common Stock | 7,500 | \$ 27.32 | D | Â |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|--|---------------|-----------|----------------------------------|-------|
| | Director | 10% Owner | Officer | Other |
| Amalfi Peter 25 RESEARCH DRIVE WESTBOROUGH, MA 01581 | Â | Â | Â EVP, Chief Information Officer | Â |

Signatures

s/ Arlene C. Feldman,
Attorney-in-fact

02/03/2011

**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) Nominal consideration was paid for the shares of restricted stock, as required by Delaware law for such shares to be validly issued.
- (2) Vests in four (4) equal annual increments beginning 5/24/2007.
- (3) The original option grant of 7,500 shares vested in four (4) equal annual increments beginning 5/26/2006.
- (4) The original option grant of 7,500 shares vested in four (4) equal annual increments beginning 9/29/05.

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.