United States Securities and Exchange Commission  
Washington, D.C. 20549  

Statement of Changes in Beneficial Ownership of Securities  

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

I. Name and Address of Reporting Person  
Rempell Michael R  
(Last) (First) (Middle)  

American Eagle Outfitters, Inc., 401 5th Ave.  

AMERICAN EAGLE OUTFITTERS, INC., 401 5TH AVE.  

NEW YORK, NY 10016  

II. Issuer Name and Ticker or Trading Symbol  
American Eagle Outfitters, Inc. [AEO]  

III. Date of Earliest Transaction (MM/DD/YYYY)  
3/26/2019  

IV. Relationship of Reporting Person(s) to Issuer  
(X) Officer (give title below)  
EVP, Chief Operations Officer  

V. Individual or Joint/Group Filing  
(X) Form filed by One Reporting Person  

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Trans. Date</th>
<th>Executed Date, if any</th>
<th>Trans. Code</th>
<th>Acquired/Discharged</th>
<th>Amount</th>
<th>Price</th>
<th>Ownership Form</th>
<th>Nature of Indirect Beneficial Ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stock Option - Right to Buy</td>
<td>3/26/2019</td>
<td></td>
<td></td>
<td>A</td>
<td>88697.0000</td>
<td>$21.4100</td>
<td>(1)</td>
<td>3/26/2026</td>
</tr>
</tbody>
</table>

Explanation of Responses:  
(1) Option vests 1/3 per year beginning on the first anniversary of the date of grant.  

Reporting Owners  

<table>
<thead>
<tr>
<th>Reporting Owner Name / Address</th>
<th>Relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rempell Michael R</td>
<td>EVP, Chief Operations Officer</td>
</tr>
<tr>
<td>AMERICAN EAGLE OUTFITTERS, INC. 401 5TH AVE. NEW YORK, NY 10016</td>
<td></td>
</tr>
</tbody>
</table>

Signatures  

Robert J. Tannous, Attorney-in-Fact  
3/28/2019  

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)(vi).  
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 control number.  

Date