Edgar Filing: FOOT LOCKER INC - Form 4

| FOOT LOC Form 4 | CKER INC | | | | | | | | | | |
|---|---|--|--|--|--|---------|------------------------|--|--|---|--|
| January 27, | 2012 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | OMB APPROVAL | | | | |
| | Washington, D.C. 20549 | | | | | | OMMISSION | OMB Number: | 3235-0287 | | |
| Check the check | aar | | | | | | Expires: | January 31, 2005 | | | |
| subject Section Form 4 | to SIAIE 16. | MENT OI | F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | Estimated average burden hours per response | | |
| Form 5 obligations may continue. See Instruction 1(b). 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 <u>*</u> YOUNG DONA D | | | 2 isouer raune und riener er riading | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | Middle) | | of Earliest 7 | | | | (Check all applicable) | | | | |
| (Last) (First) (Middle) C/O FOOT LOCKER, INC., 112 WEST 34TH STREET | | | (Month/Day/Year) | | | | | _X_ Director10% Owner Officer (give titleOther (specify below)below) | | | |
| (Street) | | | Filed(Month/Day/Year) A | | | | | 6. Individual or Joint/Group Filing(Check | | | |
| NEW YOR | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | | |
| (City) | (State) | (Zip) | | | | | | | | | |
| (City) | (State) | (Zip) | Tab | ole I - Non- | Derivative Se | ecuriti | es Acqu | ired, Disposed of, | or Beneficiall | y Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemo Execution any (Month/Da | Date, if | 3. Transactic Code (Instr. 8) | 4. Securities our Disposed (Instr. 3, 4 ar | of (D) | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Phantom | | | | Code V | Amount | (D) | Price | (Instr. 3 and 4) | | | |
| stock units | 01/27/2012 | | | A <u>(1)</u> | 273.7361 | А | \$ 26.44 | 44,137.8773 | D | | |
| Common Stock | | | | | | | | 25,430 | D | | |

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

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.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 9. Nu Deriv Secur Bene Ownd Follo Repo Trans (Instr | |
|---|---|---|--|---|---------------------|--------------------|---|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |

Reporting Owners

Relationships **Reporting Owner Name / Address** 10% Owner Officer Other Director YOUNG DONA D C/O FOOT LOCKER, INC. Х 112 WEST 34TH STREET NEW YORK, NY 10120 Signatures Sheilagh M. Clarke, Attorney-in-Fact for Dona D. 01/27/2012 Young **Signature of Reporting Person

Explanation of Responses:

- 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).
- Phantom stock units were accrued under the Foot Locker 2007 Stock Incentive Plan, as amended and restated, and are to be settled only (1)in stock following the reporting person's termination of service as a director.

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.

Date