Edgar Filing: NORTHERN TRUST CORP - Form 4

NORTHERN Form 4 February 21.	N TRUST CORP . 2014											
FORM			GEGU					COMMISSION	т. Т	APPROVAL		
	UNITED	STATES	OMB Number:	3235-0287								
Check th if no long subject to Section 1 Form 4 of Form 5 obligatio may com <i>See</i> Instr 1(b).	ger o 16. or Filed pur tinue.	STATEMENT OF CHANGES IN 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										
(Print or Type]	Responses)											
1. Name and A Bowman Bi	Address of Reporting iff	Person <u>*</u>	Symbol	er Name an HERN TH]			ing	5. Relationship o Issuer (Che	of Reporting F eck all applica			
(Last) (First) (Middle) 50 S. LASALLE STREET			3. Date of Earliest Transaction (Month/Day/Year) 02/19/2014					Director 10% Owner X_ Officer (give title Other (specify below) Executive VP, Human Resources				
CHICAGO	(Street) , IL 60603		endment, D onth/Day/Yea	-	al		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivativo	e Secu	rities Aco	quired, Disposed (of, or Benefic	cially Owned		
1.Title of Security (Instr. 3)	turity (Month/Day/Year) Execution str. 3) any		ed Date, if	3. Transactic Code (Instr. 8)	4. Securi	ties Ad ispose 4 and (A)	cquired d 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)		
Common Stock (1)	02/19/2014			Code V F	Amount 634	or (D) D	Price \$ 62.02	(Instr. 3 and 4) 27,422 (2)	D			
Common Stock								17,219 <u>(2)</u>	D			
Common Stock								546.53	Ι	401(k) as of 12-31-2013		

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

Edgar Filing: NORTHERN TRUST CORP - Form 4

number.

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

1. Title of Derivative2.Derivative SecurityConversion or Exercise(Instr. 3)Price of Derivative Security		3. Transacti (Month/Da		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transactio Code (Instr. 8)	of Derivative Securities Acquired			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo
							 (A) or Disposed of (D) (Instr. 3, 4, and 5) 						Repo Trans (Instr
								Date Exercisable	Expiration Date	Title	Amount or Number of		
Repor	ting O	wners	6			Code V	(A) (D)				Shares		
Departing	Owner Name / Addre	/ Address				Relation	nships						
Reporting		/ 11uur 035	Director	10% Owner	Of	fficer			Othe	r			
	Biff SALLE STR O, IL 60603		Executive VP, Hur					nan Resourc	ces				
Signa	tures												
Paul A. B	Bernacki, At	torney-in-	Fact for	S. Biff		0.2	01/0014						

Date

Bowman 02/21/2014

**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).

(1) Represents stock units payable automatically on a 1-for-1 basis in shares of the Corporation's common stock.

On February 19, 2014, 1,961 already reported and vested stock units, granted on February 15, 2010, were distributed to the reporting person. 1,327 stock units were distributed to the reporting person as common stock of NTRS and 634 stock units were withheld in payment of Federal, State and Medicare taxes.

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.