### Edgar Filing: NORTHERN TRUST CORP - Form 4

#### NORTHERN TRUST CORP

Form 4

December 10, 2004

### FORM 4

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

**OMB** Number:

3235-0287 January 31,

0.5

Check this box if no longer

subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Expires: 2005 Estimated average

**OMB APPROVAL** 

burden hours per response...

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * CROSS DOLORES E |                                       |                | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>NORTHERN TRUST CORP<br>[NTRS] |                                        |                                                   |                           |         | 5. Relationship of Reporting Person(s) to<br>Issuer  (Check all applicable)                                        |                                                                      |                                                       |  |
|-----------------------------------------------------------|---------------------------------------|----------------|----------------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------|---------------------------|---------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------|--|
| (Last) 50 S. LA SA                                        |                                       | Middle)        | 3. Date of (Month/Da 12/09/20                                                          | •                                      |                                                   |                           |         | _X_ Director<br>Officer (gives)<br>below)                                                                          |                                                                      | 6 Owner<br>er (specify                                |  |
|                                                           |                                       |                |                                                                                        | ndment, Date Original<br>hth/Day/Year) |                                                   |                           |         | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person                  |                                                                      |                                                       |  |
| CHICAGO, IL 60675                                         |                                       |                |                                                                                        |                                        |                                                   |                           |         | Form filed by More than One Reporting Person                                                                       |                                                                      |                                                       |  |
| (City)                                                    | (State)                               | (Zip)          | Table                                                                                  | I - Non-D                              | erivative S                                       | Securi                    | ties Ac | quired, Disposed                                                                                                   | of, or Beneficia                                                     | lly Owned                                             |  |
| 1.Title of<br>Security<br>(Instr. 3)                      | 2. Transaction Day<br>(Month/Day/Year | Executi<br>any | emed<br>on Date, if<br>/Day/Year)                                                      | 3.<br>Transactic<br>Code<br>(Instr. 8) | 4. Securi<br>onAcquirec<br>Disposec<br>(Instr. 3, | I (A) of (D) 4 and (A) or | ))      | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |  |
| Common Stock (1)                                          | 12/09/2004                            |                |                                                                                        | D                                      | 800 (2)                                           | D                         | \$0     | 4,000                                                                                                              | D                                                                    |                                                       |  |
| Common<br>Stock                                           |                                       |                |                                                                                        |                                        |                                                   |                           |         | 2,200                                                                                                              | D                                                                    |                                                       |  |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 | 2.          | 3. Transaction Date |                    | 4.         | 5.         | 6. Date Exerc    |            | 7. Title   |          | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|------------------|------------|------------|----------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transacti  | orNumber   | Expiration D     | ate        | Amou       | nt of    | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/      | Year)      | Under      | lying    | Security    | Secur  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e                |            | Securi     | ties     | (Instr. 5)  | Bene   |
|             | Derivative  |                     |                    |            | Securities |                  |            | (Instr.    | 3 and 4) |             | Own    |
|             | Security    |                     |                    |            | Acquired   |                  |            |            |          |             | Follo  |
|             |             |                     |                    |            | (A) or     |                  |            |            |          |             | Repo   |
|             |             |                     |                    |            | Disposed   |                  |            |            |          |             | Trans  |
|             |             |                     |                    |            | of (D)     |                  |            |            |          |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |                  |            |            |          |             |        |
|             |             |                     |                    |            | 4, and 5)  |                  |            |            |          |             |        |
|             |             |                     |                    |            |            |                  |            |            |          |             |        |
|             |             |                     |                    |            |            |                  |            |            | Amount   |             |        |
|             |             |                     |                    |            |            | Date             | Expiration |            | or       |             |        |
|             |             |                     |                    |            |            | Exercisable      | Date       | Title Numb | Number   |             |        |
|             |             |                     |                    |            |            | LACICISAUIC Date | Date       |            | of       |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |                  |            |            | Shares   |             |        |

# **Reporting Owners**

| Reporting Owner Name / Address | Relationships |           |         |       |  |  |  |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|
| • 0                            | Director      | 10% Owner | Officer | Other |  |  |  |
| CROSS DOLORES E                |               |           |         |       |  |  |  |
| 50 S. LA SALLE ST.             | X             |           |         |       |  |  |  |
| CHICAGO, IL 60675              |               |           |         |       |  |  |  |

## **Signatures**

Eileen C. Ratzka POA for Dolores E. 12/10/2004 Cross

> \*\*Signature of Reporting Person Date

## **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.
- Reporting person resigned from the Board of Directors of Northern Trust Corporation on December 9, 2004. Reporting person has (2) forfeited the 800 stock units that were to vest if the reporting person were to be re-elected to the Board at the annual meeting of

shareholders in April 2005.

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.

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