## Edgar Filing: NORTHERN TRUST CORP - Form 4

NORTHERN Form 4 January 04, 2	TRUST CORP								
FORM	1						OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								3235-0287	
Check this if no longe subject to	er STATEM	ENT OF CHAN	GES IN F SECURI		NERSHIP OF		Estimated average		
Form 4 or Form 5 obligation may contin	Form 4 or Form 5 obligations may continue. See Instruction Form 5 obligations may continue. See Instruction Form 5 obligations May continue. See Instruction Form 5 May Company Act of 1935 or Section May Company Act of 1940 May Company Act of 1940 Section 16(a) of the Investment Company Act of 1940								
(Print or Type R	esponses)								
1. Name and Ac JAIN DIPAR	Symbol	Name and T		-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 50 SOUTH I	(Month/D	-	insaction		_X_ Director10% Owner Officer (give titleOther (specify below) below)				
		4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>				
CHICAGO,	IL 60603					Form filed by M Person	Aore than One Re	eporting	
(City)	(State) (Z	Zip) Tabl	e I - Non-De	erivative S	ecurities Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if any	Code	TransactionAcquired (A) orCodeDisposed of (D)Instr. 8)(Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock			Code V	Amount	(A) or (D) Price	Transaction(s) (Instr. 3 and 4)	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.

 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. Transacti Code (Instr. 8)	5. Number on f Derivative Securitie Acquired (A) or Disposed of (D) (Instr. 3, and 5)	Expiration E ve (Month/Day s 1	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
			Code V	(A) (I	Date Exercisable D)	Expiration Date	Title	Amount or Number of Shares	
Stock Units (2)	<u>(2)</u>	12/31/2015	А	395	(2)	(2)	Common Stock	395	\$ 72.6

## Edgar Filing: NORTHERN TRUST CORP - Form 4

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
JAIN DIPAK C 50 SOUTH LASALLE STREET CHICAGO, IL 60603	Х						
Signatures							
Bradley R. Gabriel, Attorney-in-F C. Jain	pak	01/04/2016					
<b>**</b> Signature of Reporting Per		Date					
Explanation of Poo	nonc	201					

## **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) Includes 16,346 shares representing stock units payable automatically on a 1-for-1 basis in shares of the Corporation's common stock.
- Stock units representing the deferral of cash compensation pursuant to the Northern Trust Corporation 1997 Deferred Compensation Plan (2) for N = E and E and
- (2) for Non-Employee Directors. Each unit is the economic equivalent of one share of the Corporation's common stock and will be settled in cash upon termination of the Director's service on the Board.

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.