GAP INC Form 4 July 01, 2008

## FORM 4

#### OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or Expires: January 31,

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue.

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

See Instruction 30(h) of the Investment Company Act of 1940

1(b).

(Last)

(City)

(Instr. 3)

(Print or Type Responses)

1. Name and Address of Reporting Person \*

2. Issuer Name **and** Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

SAGE GAVIN EVA

(First)

Symbol

(Check all applicable)

(Middle)

3. Date of Earliest Transaction

GAP INC [GPS]

\_\_\_\_\_ Director \_\_\_\_\_ 10% Owner

(Month/Day/Year) C/O GAP INC., TWO FOLSOM ST 06/30/2008

(Zip)

 $\frac{X}{\text{below}}$ 

X\_ Officer (give title \_\_\_\_ Other (specify

EVP, Human Resources

C/O GAF INC., I WO FOLSOW ST 06

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person \_\_\_\_ Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

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

SAN FRANCISCO, CA 94105-1205

(State)

(Street)

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date 2. Transaction Date 3. Transaction Date 3.

2A. Deemed 3. 4. Securities
Execution Date, if TransactionAcquired (A) or
any Code Disposed of (D)
(Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of Securities Form: Dir Beneficially (D) or Ind Owned (I) Following (Instr. 4)

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership (Instr. 4)

(A)

Reported
Transaction(s)

Code V Amount (D) Price (Instr. 3 and 4)

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.

SEC 1474

(9-02)

## 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	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionDerivative		Expiration Date	Underlying Securities	
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	

D S

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(Instr. 3)	Price of Derivative Security	privative Disposed of (D)									
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Notional Gap Stock (1)	(2)	06/30/2008		A		13.9982		(2)	(2)	Common Stock	13.9982

### **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

SAGE GAVIN EVA
C/O GAP INC.
TWO FOLSOM ST
SAN FRANCISCO, CA 94105-1205

EVP,
Human
Resources

## **Signatures**

/s/ Ingrid Freire, Power of Attorney 07/01/2008

\*\*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) Notional Gap Stock is acquired through participation in the Supplemental Deferred Compensation Plan.
- Each share of Notional Gap Stock is the economic equivalent of one share of Gap Inc. common stock. The shares become payable in (2) cash, pursuant to the election of the reporting person at the time of enrollment in the Plan or in certain circumstances following termination.

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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