Edgar Filing: NORTHERN TRUST CORP - Form 4

NORTHER	N TRUST CORP	•											
July 18, 201										OMB A	PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										OMB Number:	3235-0287		
Check this box										Expires:	January 31, 2005		
subject to STATEMENT OF CHA Section 16. Form 4 or				SECU	JR	ITIES				Estimated average burden hours per response			
obligatio may con <i>See</i> Instr 1(b).	tinue. Section 170	(a) of the l	Public U	tility Ho	old	ling Coi	npan	•	e Act of 1934, 1935 or Section 0	1			
(Print or Type	Responses)												
Cohodes Jeffrey D. Syn				er Name a				ing	5. Relationship of Reporting Person(s) to Issuer				
				HERN 1]	ľR	USTCO	JRP		(Check all applicable)				
				of Earliest Transaction /Day/Year) /2014					Director 10% Owner X Officer (give title Other (specify below) below) ExecutiveVP/Chief Risk Officer				
					Amendment, Date Original Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
(City)	(State)	(Zip)							Person				
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Dat any (Month/Day/Y			3. Transact Code	tion	erivative 4. Securit (A) or Di (Instr. 3,	ies A spose	cquired d of (D)	Jired, Disposed of 5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)	(
Common Stock	07/16/2014			M <u>(1)</u>		100	Α	\$ 52.095	19,133	D			
Common Stock	07/16/2014			S <u>(1)</u>		100	D	\$ 65.74	19,033	D			
Common Stock (2)									23,155	D			
Common Stock									3,816.52	I	401(k) as of 6-30-2014		

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

Edgar Filing: NORTHERN TRUST CORP - Form 4

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right-to-buy)	\$ 52.095	07/16/2014		M <u>(1)</u>		100	(3)	02/21/2016	Common Stock	100

Reporting Owners

Reporting Owner Name / Address	Relationships						
I B B B B B B B B B B B B B B B B B B B	Director	10% Owner	Officer	Other			
Cohodes Jeffrey D. 50 SOUTH LASALLE STREET CHICAGO, IL 60603			ExecutiveVP/Chief Risk Officer				
Signatures							
Darren C. Baker, Attorney-In-Fact for Jeffrey D. Cohodes			07/18/2014				
**Signature of Reporting P	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) This transaction was effected pursuant to a trading plan adopted in accordance with SEC Rule 10b5-1.
- (2) Represents stock units payable automatically on a 1-for-1 basis in shares of the Corporation's common stock.
- (3) These options became exercisable in four annual installments beginning on 2/21/2007.

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.