### NORTHERN TRUST CORP

Form 4 April 16, 2013

## FORM 4

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

**OMB** Number:

response...

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 burden hours per

**OMB APPROVAL** 

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 A	rting Person *	Issuer Name <b>and</b> Ticker or Trading  Symbol				5. Relationship of Reporting Person(s) to Issuer				
			NORTHERN TRUST CORP [NTRS]				(Check all applicable)			
(Last)	(First)	(Middle)	(Month/	Day/Year)	Γransaction		X Director Officer (give below)	title Oth	6 Owner er (specify	
50 SOUTH	TREET	04/16/2013				,				
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
		Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
CHICAGO,	IL 60606						Form filed by M Person	lore than One R	eporting	
(City)	(State)	(Zip)	Tab	le I - Non	-Derivative Secur	ities Acq	uired, Disposed of	, or Beneficia	lly Owne	
1.Title of Security		Date 2A. Dee Year) Execution		3. Transact	4. Securities Action(A) or Disposed	•	5. Amount of Securities	6. Ownership	7. Natu Indirect	

	(City)	(State)	Table Table	e I - Non-D	erivative Se	curitie	s Acqu	ired, Disposed of	, or Beneficiall	ly Owned
5	Title of Security Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securities on(A) or Dispo (Instr. 3, 4 a	osed of		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
	Common Stock (1)	04/16/2013		A	1,872.31	A	\$0	1,872.31 (2)	D	
	Common Stock							3,769 (2)	I	By Trust
	Common Stock							1,000	D	

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

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#### number.

# 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.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr. :	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration		or Name la sur		
						Exercisable	Date		Number		
				C 1 W	(A) (D)				of		
				Code V	(A) (D)			,	Shares		

## **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

SLARK MARTIN P

50 SOUTH LASALLE STREET X

CHICAGO, IL 60606

### **Signatures**

Paul A. Bernacki, Attorney-in-Fact for Martin P. Slark 04/16/2013

\*\*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.
- On April 16. 2013, 1920.20 already reported and vested stock units were distributed as common stock directly to the reporting person. The fractional share was paid in cash.

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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