FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

							()				1,								
Name and Address of Reporting Person* <u>Cipriano Giovanna</u>						2. Issuer Name and Ticker or Trading Symbol FOOT LOCKER INC [FL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
														Directo			10% Ow		
					·									X Officer below)	(give title		Other (s below)	pecify	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								,			,		
FOOT LOCKER, INC.						03/28/2007								VP &	Cnief Ac	coun	ting Office	er	
'																			
112 WEST 34TH STREET							ndmont l	Data	of Original	Tile d	/Month/Do		6. Individual or Joint/Group Filing (Check Applicable						
							4. If Amendment, Date of Original Filed (Month/Day/Year)								dividual or Joint/Group Filing (Check Applicable				
(Street)													•	Form filed by One Reporting Person					
NEW YORK NY 10120														n filed by More than One Reporting					
					.									Persor		e man	One Repor	ung	
(City)	(5	State)	(Zip)																
(5)			(
		Tal	ble I - Noi	າ-Deriv	vativ	e Se	curitie	s Ac	quired,	Dis	posed o	f, or Be	neficial	y Owned					
1. Title of	Security (Ins	tr. 3)		2. Trans	saction	ction 2A. Deemed						ies Acquir		5. Amou				7. Nature of	
		•		Date (Month/Day/Ye		ear) Execution Date,		, Transaction Code (Instr.		Disposed Of (D) (Instr. 3, 4			5) Securitie Benefici			orm: Direct D) or Indirect	Indirect Beneficial Ownership		
				(wonth)	(WOIIIII/Day/Teal)		(Month/Day/Year)							Owned I	ed Following			str. 4)	
										T		(A) c	r .	Reporte Transac			- 1	(Instr. 4)	
									Code	۱۷	Amount	(D)	Price	(Instr. 3					
Common Stock 03/28/							/2007		A		10,000	(1) A	\$0	12	12,804		D		
						-			+	-	 	_	-		<i>*</i>	-			
Common Stock													1,031.673		l ı		401(k)		
Common Stock														1,001,075			1	Plan	
			Table II -	Deriva	tivo	Sac	uritios	۸۰۵	uirod C	lien	ocad of	or Ron	oficially	Owned					
											oseu oi, onvertik			Owneu					
		T			Juto,	- Ouii	-	_	•					T	T	. 1			
1. Title of Derivative	2. 3. Transaction 3A. Deeme Execution					ction			6. Date Expiration		able and 7. Title and Am of Securities			8. Price of Derivative			10. Ownership	. Beneficial	
Security or Exercise (Month/Day/Year) if any C				Code (. Derivative		(Month/Da		r) Underlying		ıg	Security	Securities	s	Form:			
(Instr. 3)	Price of Derivative		(Month/Day	/Year) 8	Year) 8)		Securities Acquired (A) or Disposed of (D) (Instr.					Derivative Securi (Instr. 3 and 4)		(Instr. 5)	Beneficially Owned Following	lly	Direct (D) or Indirect	t (Instr. 4)	
	Security								(1130.3 &				,			,	(I) (Instr. 4		
															Reported Transaction (Instr. 4)			1	
							3, 4 and 5)									(-,			
				Г				ΠÌ					Amount	1					
													or Number						
									Date		Expiration		of						
				C	Code	V	(A)	(D)	Exercisab	le	Date	Title	Shares						
Employee																			
stock option	\$23.42	03/28/2007			A		10,000		03/28/200	g(2)	03/28/2017	Common	10,000	\$0	10,00	n	D		
(right to	Ψ25.72	03/20/2007			11		10,000		03/20/200	v	03,20,2017	Stock	10,000	**	10,00	·	"		

Explanation of Responses:

- $1. \ Restricted \ stock \ award \ under \ the \ 1998 \ Stock \ Option \ and \ Award \ Plan.$
- 2. Option becomes exercisable in three equal annual installments beginning March 28, 2008, which is the first anniversary of the date of grant.

Remarks:

Sheilagh M. Clarke, Attorneyin-Fact for Giovanna Cipriano

03/30/2007

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.