SEC Form 4
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

X 10% Owner

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

Director

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

1. Name and Address of Reporting Person\*

Vesa Equity Investment S.a r.l.

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

2. Issuer Name and Ticker or Trading Symbol

FOOT LOCKER, INC. [FL]

						8. Date of Earliest Transaction (Month/Day/Year) 1/24/2020								Officer (give title Other (specify below) below)					
(Street) LUXEMBOURG N4 L-1855					f Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person							
(City)	(3			n-Deriva		Secu	ritio		wirod	Die	nosed of	or Be	nefic	ially	Own				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities	es Acquired (A) Df (D) (Instr. 3, 4		or 5. Ar 4 and Secu Bene		ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	;	Transa (Instr. :	ction(s) 3 and 4)			
Common	stock			11/24/2	2020				Р		81,249	A	\$38	.46	10,8	302,811		<b>D</b> <sup>(1)</sup>	
Common	stock			11/24/2	2020			Р		428,326	A	\$ <mark>38</mark>	.69 11,		231,137	<b>D</b> <sup>(1)</sup>			
		Tal	ble II -								osed of, o				Ownee	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any		4. 5. Nu Transaction of Code (Instr. Deriv 8) Secu (A) ou Dispo of (D)		umber vative urities uired or oosed o) tr. 3, 4	6. Date Exerc Expiration Da (Month/Day/Y		isable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. P Deri Sec	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date		Amount or Jumber of Shares						
		f Reporting Person <sup>*</sup> estment S.a r.	<u>l.</u>																
(Last) 39 AVEN	NUE JOHN	(First) F. KENNEDY	(Mi	ddle)															
(Street) LUXEM	BOURG	N4	L-3	1855		_													
(City)		(State)	(Zip	))															
	nd Address o estment S	f Reporting Person <sup>*</sup> 5.a r.l.																	
(Last) 39 AVEN	NUE JOHN	(First) F. KENNEDY	(Mi	ddle)															
(Street) LUXEM	BOURG	N4	L-3	1855															
(City)		(State)	(Zip	)															
	nd Address o S <mark>ky Danie</mark>	f Reporting Person <sup>*</sup> 2]																	
(Last) PARIZS	KA 26	(First)	(Mi	ddle)															
(Street)						-													

PRAGUE	2N	110 00
(City)	(State)	(Zip)

## Explanation of Responses:

1. Vesa Equity Investment S.a r.l. is the record holder of the shares reported herein. The principal shareholder of Vesa Equity is EP Investment S.a r.l. the ultimate beneficial owner of which is Daniel Kretinsky. Each of EP Investment S.a r.l. and Mr. Kretinsky disclaims beneficial ownership of these shares except to the extent of its or his respective pecuniary interest therein.

<u>11/27/2020</u>
<u>11/27/2020</u>
<u>11/27/2020</u>

\*\* 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.