FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO              | VAL       |
|---|------------------------|-----------|
|   | OMB Number:            | 3235-0287 |
| l | Estimated average burd | en        |
| 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

| Name and Address of Reporting Person*     Cipriano Giovanna     (Last) (First) (Middle) |  |  |                  |                          |                |  | Issuer Name and Ticker or Trading Symbol FOOT LOCKER, INC. [ FL ]      Date of Earliest Transaction (Month/Day/Year)     03/26/2017 |  |                                  |  |                            |    |   |                               | ck all app<br>Direct<br>Offict<br>below   | er (give title  |   | 10% C<br>Other<br>below)                        | wner<br>specify   |
|---|--|--|------------------|--------------------------|----------------|--|---|--|----------------------------------|--|----------------------------|----|---|-------------------------------|---|---|---|---|---|
| FOOT LOCKER, INC.<br>330 WEST 34TH STREET   |  |  |                  |                          |                |  |   |  |                                  |  |                            |    |   | Class                         | امريانية  | ur laint/Craur  | - Filipa (                                    | Chaal, A  | nnlinabla   |
| (Street)  NEW YORK, NY 10001  (City) (State) (Zip)                                      |  |  |                  |                          | -   4. IT<br>- | 4. If Amendment, Date of Original Filed (Month/Day/Year) |   |  |                                  |  |                            |    |   |                               | dividual or Joint/Group Filing (Check Applicable )  K Form filed by One Reporting Person Form filed by More than One Reporting Person |   |   |   |   |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned        |  |  |                  |                          |                |  |   |  |                                  |  |                            |    |   |                               |   |   |   |   |   |
| 1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day                           |  |  |                  |                          |                | Execution D  |   | Date,  | Transaction Disp<br>Code (Instr. |  | 4. Securitie<br>Disposed C |    |   | and 5) Secui<br>Bene          |   | icially<br>d Following  | 6. Owner<br>Form: D<br>(D) or In<br>(I) (Inst | Direct<br>ndirect                               | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |  |  |                  |                          |                |  | Code  | v  | Amount                           | (A) (D)  | Pri                        | се | Trans   | nnsaction(s)<br>str. 3 and 4) |   |   | (111501.4)                                    |   |   |
| Common Stock 03/26/20   |  |  |                  |                          |                |  | .017  |  | F <sup>(1)</sup>                 |  | 1,684                      | D  | \$7   | '2.59 <sup>(2)</sup>          | 48  | ,393(3)(4)  | Ι   | )   |   |
| Common Stock  |  |  |                  |                          |                |  |   |  |                                  |  |                            |    |   |                               | 2,  | 2,711.572   |   | [   | 401(k)<br>Plan  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |                  |                          |                |  |   |  |                                  |  |                            |    |   |                               |   |   |   |   |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                                     | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | Execution if any | ny C<br>onth/Day/Year) 8 |                | ansaction<br>ode (Instr.                                 |   | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |                                  | 6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date |                            |    | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares |                               | Price of<br>rivative<br>curity<br>str. 5)   | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owi<br>Fori<br>Dire<br>or Ii<br>(I) (I        | nership<br>m:<br>ect (D)<br>ndirect<br>nstr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4)            |

## Explanation of Responses:

- 1. Shares withheld in payment of tax liability in connection with the vesting of previously reported award of 4,554 restricted stock units, which vested on March 26, 2017.
- $2.\ Price\ is\ equal\ to\ the\ closing\ price\ of\ a\ share\ of\ the\ Company's\ common\ stock\ on\ March\ 24,\ 2017.$
- 3. Includes 2,870 net shares received on vesting of award on March 26, 2017.
- 4. Includes 393 shares acquired on June 1, 2016 through the Employee Stock Purchase Plan.

## Remarks:

Anthony D. Foti, Attorney-in-Fact for Giovanna Cipriano 03/28/2017

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.