SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burd	len								
hours per response:	0.5								

1. Name and Address of Reporting Person*		erson*	2. Issuer Name and Ticker or Trading Symbol FOOT LOCKER INC [FL]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
HICKS KEP			[]	X	Director	10% Owner				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	— x	Officer (give title below)	Other (specify below)				
HICKS KEN C (Last) (First) (Middle) FOOT LOCKER, INC. 112 WEST 34TH STREET (Street) NEW YORK NY 10120			03/23/2014		Chairman and CEO					
112 WEST 34T	H STREET									
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	/idual or Joint/Group Fili	ing (Check Applicable				
· · ·	NY	10120		X	Form filed by One Re	eporting Person				
			—	Form filed by More than One Repor Person		an One Reporting				
(City)	(State)	(Zip)								

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)				5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (notr. 4)		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock	03/23/2014		F ⁽¹⁾		51,947	D	\$45.84	541,550 ⁽²⁾	D		
Common Stock	03/23/2014		F ⁽³⁾		25,420	D	\$45.84	516,594 ⁽⁴⁾	D		
Common Stock								247.278	I	401(k) Plan	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

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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. Transa Code (8)		n of		of Expiration Date Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4			Expiration Date (Month/Day/Year) cquired) or sposed (D) str. 3, 4		and nt of ties ying tive ty (Instr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. Shares withheld in payment of tax liability in connection with the vesting of previously reported award of 102,177 restricted stock units, which vested on March 23, 2014.

2. Includes 50,230 net shares received on vesting of restricted stock unit award on March 23, 2014.

3. Shares withheld in payment of tax liability in connection with the vesting of previously reported restricted stock award, which vested on March 23, 2014.

4. Includes 464 shares acquired on June 1, 2013 through the Employees Stock Purchase Plan.

Remarks:

<u>Sheilagh M. Clarke, Attorney-</u> in-Fact for Ken C. Hicks

<u>03/25/201</u>4

** 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.