Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
Section 16. Form 4 or Form 5		
obligations may continue. See		

OMB APPROVAL

OMB Number: Estimated average burden hours per response: 0.5

Filed purguent to Coation 16(a) of the Cogurities Evolution Act of 103
Filed pursuant to Section 16(a) of the Securities Exchange Act of 193
or Cootion 20(h) of the Investment Company Act of 1040

1. Name and Address of Reporting Person* BROWN PETER D						2. Issuer Name and Ticker or Trading Symbol FOOT LOCKER INC [FL]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify				
(Last) (First) (Middle) C/O FOOT LOCKER, INC. 112 WEST 34TH STREET (Street) NEW YORK NY 10120							of Earli 2005	iest Tran	saction (M	lonth	/Day/Year)			Officer (give title below) VP and Treas			below)		
					_ 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicabl Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S		(Zip)																
1 Title of	Socurity (Inc		ole I - No	n-Deri		_	2A. Dec		quired,	Dis	1			5. Amou		6.00	vnership	7. Nature	
1. Title of Security (Instr. 3)			Date (Month/Day/Ye		//Year) Exe		execution Date, any Month/Day/Year)		Transaction Code (Instr.		ies Acquired (A) or Of (D) (Instr. 3, 4 and		5) Securition Benefici Owned I	es ally Following	Form (D) o	n: Direct or Indirect nstr. 4)	of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock				06/1	06/13/2005				М		1,132	A	\$16.0	2 12	,264 D		D		
Common	Stock			06/1	3/2005	5			M		2,945	A	\$10.24	15 15	15,209				
Common	Stock			06/1	3/2005	5			S		1,860	D	\$25.9	1 13	13,349		D		
Common Stock			06/1	06/13/2005				S		781	D	\$25.9	_	,568	D				
Common Stock			06/1	3/2005	5			S		3,200	D	\$25.9	10,4	439(1)		D			
Common Stock													1,04	5.913		I	401(k) Plan		
		-	Table II -								osed of,			Owned			·		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	ed Date,	4. Transa	4. Transaction Code (Instr.		5. Number 6.		6, options, convert 6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab	le	Expiration Date	Title	Amount or Number of Shares						
Employee stock option (right to buy)	\$16.02	06/13/2005			M			1,132	04/18/200	3 ⁽²⁾	04/18/2012	Common Stock	1,132	\$0	16,60	4	D		
Employee stock option (right to buy)	\$10.245	06/13/2005			М			2,945	04/16/200	4 ⁽³⁾	04/16/2013	Common Stock	2,945	\$0	10,38	9	D		

Explanation of Responses:

- 1. Includes 1,071 shares acquired on 06/01/2005 through the Employees Stock Purchase Plan.
- $2. \ Option \ granted \ on \ 04/18/2002 \ and \ became \ exercisable \ in \ three \ equal \ annual \ installments, \ beginning \ 04/18/2003.$
- 3. Option granted on 04/16/2003 and becomes exercisable in three equal annual installments, beginning 04/16/2004.

Remarks:

Sheilagh M. Clarke, Attorneyin-Fact for Peter D. Brown

06/14/2005

** 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.