### Edgar Filing: Cohodes Jeffrey D. - Form 4

| Cohodes Jeff   | rey D.  |   |  |              |             |  |         |   |  |  |  |
|--|---|---|--|--------------|-------------|--|---------|---|--|--|--|
| Form 4<br>February 13,   | 2013  |   |  |              |             |  |         |   |  |  |  |
|  |   |   |  |              |             |  |         |   | OMB A  | PPROVAL  |  |
| FORM   |   | SECURITIES AND EXCHANGE C<br>Washington, D.C. 20549   |  |              |             |  |         | 3235-0287   |  |  |  |
| Check this<br>if no long<br>subject to<br>Section 16<br>Form 4 or<br>Form 5<br>obligation<br>may conti<br><i>See</i> Instru<br>1(b). | er <b>STATI</b><br>5.<br>Filed p<br><sup>15</sup> Section 1 | <b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b><br><b>SECURITIES</b><br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>ction 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |  |              |             |  |         |   |  | January 31<br>Expires: 2005<br>Estimated average<br>burden hours per<br>response 0.5 |  |
| (Print or Type R   | esponses)   |   |  |              |             |  |         |   |  |  |  |
| 1. Name and Address of Reporting Person <u>*</u><br>Cohodes Jeffrey D.   |   |   | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>NORTHERN TRUST CORP<br>[NTRS] |              |             |  |         | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                                 |  |  |  |
| (Last) (First) (Middle) 50 SOUTH LASALLE STREET  |   |   | 3. Date of Earliest Transaction<br>(Month/Day/Year)<br>02/11/2013                      |              |             |  |         | Director 10% Owner<br>X Officer (give title Other (specify<br>below) below)<br>ExecutiveVP/Chief Risk Officer |  |  |  |
| CHICAGO,   | 4. If Amendment, Date Original Filed(Month/Day/Year)        |   |  |              |             | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |         |   |  |  |  |
|  |   |   |  |              |             |  |         | Person  |  |  |  |
| (City)   | (State)   | (Zip)   | Table  | e I - Non-De | erivative S | lecuri   | ties Ac | quired, Disposed o  | f, or Beneficia  | lly Owned  |  |
| 1.Title of<br>Security<br>(Instr. 3)   |   | Transaction Date 2A. Deemed<br>Aonth/Day/Year) Execution Date<br>any<br>(Month/Day/Year)  |  |              |             |  |         |   | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)                    |  |
|  |   |   |  | Code V       | Amount      | or<br>(D)  | Price   | Transaction(s) (Instr. 3 and 4)   |  |  |  |
| Common<br>Stock (1)  | 02/11/2013  |   |  | А            | 7,829       | А  | \$0     | 30,819  | D  |  |  |
| Common<br>Stock  |   |   |  |              |             |  |         | 10,193  | D  |  |  |
| Common<br>Stock  |   |   |  |              |             |  |         | 3,819.68 <u>(2)</u>   | Ι  | 401(k)   |  |

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

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#### number.

# 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 Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5. Number of<br>orDerivative<br>Securities<br>Acquired (A)<br>or Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) | Expiration D<br>(Month/Day) | b. Date Exercisable and<br>Expiration Date<br>Month/Day/Year) |                 | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |  |
|---|---|---|---|--|--|-----------------------------|---|-----------------|---|--|
|   |   |   |   | Code V                                 | (A) (D)  | Date<br>Exercisable         | Expiration<br>Date  | Title           | Amount<br>or<br>Number<br>of Shares                                 |  |
| Employee<br>Stock<br>Option<br>(right to<br>buy)    | \$ 52.69  | 02/11/2013                              |   | A                                      | 23,487   | <u>(3)</u>                  | 02/11/2023  | Common<br>Stock | 23,487  |  |

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                              | Relationships |           |                                |       |  |
|--|---------------|-----------|--------------------------------|-------|--|
|  | Director      | 10% Owner | Officer                        | Other |  |
| Cohodes Jeffrey D.<br>50 SOUTH LASALLE STREET<br>CHICAGO, IL 60603 |               |           | ExecutiveVP/Chief Risk Officer |       |  |
| Signatures   |               |           |                                |       |  |
| Paul A. Bernacki, Attorney-In-Fac<br>Cohodes                       | ct for Jeff   | rey D.    | 02/13/2013                     |       |  |

<u>\*\*</u>Signature of Reporting Person

## **Explanation of Responses:**

- \* 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).
- (1) Represents stock units payable automatically on a 1-for-1 basis in shares of the Corporation's common stock.
- (2) as of 12/31/12
- (3) The option becomes exercisable in four annual installments: 5,872 on February 11, 2014; 5,872 on February 11, 2015; 5,872 on February 11, 2015; 5,872 on February 11, 2017.

Date

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.