Edgar Filing: SINEGAL JAMES D - Form 4

SINEGAL JA Form 4	MES D											
December 15	. 2010											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
Chaole this	hav		Was	hingto	n, I	D.C. 20	549			Number:	3235-0287 January 31, 2005	
Check this if no longe	ər									Expires:		
subject to Section 16 Form 4 or Form 5	CHANGES IN BENEFICIAL OWN SECURITIES ection 16(a) of the Securities Exchange							Estimated average burden hours per response (
obligation may contin <i>See</i> Instruct 1(b).	s Section 17(a) of the P		ility Ho	oldi	ing Con	ipany	Act o	of 1935 or Section	n		
(Print or Type R	esponses)											
SINEGAL JAMES D S			2. Issuer Name and Ticker or Trading Symbol COSTCO WHOLESALE CORP /NEW [COST]						5. Relationship of Reporting Person(s) to Issuer			
									(Check all applicable)			
(Month/I				e of Earliest Transaction n/Day/Year) /2010					_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below)			
ISSAQUAH	(Street)		4. If Amer Filed(Mont	ndment,		e Original			6. Individual or J Applicable Line) _X_ Form filed by Form filed by M Person		erson	
(City)	(State) (2	Zip)	Table	e I - Nor	1-De	rivative	Securi	ities Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, it any (Month/Day/Year)			n Date, if	Code		4. Securi nAcquired Disposed (Instr. 3,	d (A) o d of (E))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)		
				Code	V	Amount		Price	(Instr. 3 and 4)			
Common Stock	12/14/2010			S <u>(1)</u>		8,000	D	<u>(2)</u>	824,092	D		
Common Stock									1,280,649	Ι	By LLC	
Common Stock									39,491	Ι	By GRAT	
Common Stock									39,491	I	By Spouse's GRAT	

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

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	-				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						LACICISADIC	Dute		of		
				Code V	(A) (D)				Shares		

her

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Oth			
SINEGAL JAMES D 999 LAKE DRIVE ISSAQUAH, WA 98027	Х		CEO				
Signatures							
Deanna K. Nakashima, attorney-in-fact	12/15/2010						
**Signature of Reporting Person	Date						

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) This sale was effected pursuant to a 10b5-1 trading plan.

Shares sold as follows: 100 @ 70.77 100 @ 70.78 100 @ 70.81 100 @ 70.83 100 @ 70.86 100 @ 70.88 100 @ 70.89 100 @ 70.91 200 @ 70.94 600 @ 70.95 300 @ 70.96 900 @ 70.97 1000 @ 70.98 100 @ \$70.99 100 @ 71.04 100 @ 71.05 100 @ 71.09 200 @ 71.12 100

(2) @ 71.14 100 @ 71.15 300 @ 71.16 100 @ 71.20 100 @ 71.24 200 @ 71.27 200 @ 71.28 100 @ 71.30 300 @ 71.31 100 @ 71.32 200 @ 71.33 300 @ 71.35 100 @ 71.36 400 @ 71.38 200 @ 71.39 200 @ 71.40 100 @ 71.41 20 @ 71.43 80 @ 71.44 100 @ 71.46 200 @ 71.47 100 @ 71.49

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.