## Edgar Filing: WATSON STEPHEN E - Form 4

WATSON ST	FEPHEN E											
Form 4												
September 22	2, 2017											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
UNITED STATES SECURITIES AND EACHANGE COMMISSION								ONID	3235-0287			
Check this	s box		Was	hington,	D.C. 20	549			Number:			
if no longer							Expires:	January 31, 2005				
subject to STATEMENT OF CHANG					ES IN BENEFICIAL OWNERSHI				Estimated a			
Section 10 Form 4 or		SECURITIES							burden hours per			
Form 5		repart to	Section 16	5(a) of the	- Securiti	ies Fr	vchano	ge Act of 1934,	response	0.5		
obligation	<sup>18</sup> Section 17							of 1935 or Sectio	m			
may conti <i>See</i> Instru	nue.		of the Inv	•	•	· ·						
1(b).	ction	( )			- <b>I</b> · · ·							
(Print or Type R	esponses)											
		_ *										
				r Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
WATSON STEPHEN E Symbol Issuer KOHLS Corp [KSS]						155001						
			KOHLS	Corp [K:	22]			(Cheo	ck all applicable	e)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction									
				onth/Day/Year)				_X_ Director 10% Owner Officer (give title Other (specify				
N56 W17000 RIDGEWOOD 09/20/ DRIVE			09/20/20	0/20/2017				below) below)				
			4 10 4					6 Individual or Isint/Crown Filing/C				
(Street) 4. If Amendm Filed(Month/D				endment, Date Original				6. Individual or Joint/Group Filing(Check Applicable Line)				
				ui/Day/Tear)				_X_ Form filed by One Reporting Person				
MENOMONEE Form filed by N												
FALLS, WI								Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Da	ate 2A Dee	emed	3.	4. Securi	ties		5. Amount of	7. Nature of			
Security	(Month/Day/Year	on Date, if	Transactio	onAcquired	1 (A) c		Securities	Form: Direct	Indirect			
(Instr. 3)		any	Code Disposed of (D)				Beneficially	· /	Beneficial			
(Month/Day/Year)				(Instr. 8) (Instr. 3, 4 and 5)				Owned Following		Ownership (Instr. 4)		
								Reported	(mou. r)	(Insu: I)		
						(A) or		Transaction(s)				
				Code V	Amount		Price	(Instr. 3 and 4)				
Common	09/20/2017			А	34	А	<u>(1)</u>	16,744 <u>(2)</u>	D			
Stock	07/20/2017			11	54	11	<u></u>	10,777 (7)	D			

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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transac Code (Instr. 8	5. tionNumber of ) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration E (Month/Day e			le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name	Relationships						
	Director	10% Owner	Officer	Other			
WATSON STEPHEN E							
N56 W17000 RIDGEWOO	Х						
MENOMONEE FALLS, V							
Signatures							
(Jason J. Kelroy P.O.A.)	09/22/2017						
<u>**</u> Signature of Reporting	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) Award of additional restricted stock in lieu of a \$0.55 per share dividend issued by the Company on all Common Stock, which was payable September 20, 2017. These shares vest on the same schedule as the underlying restricted shares.
- (2) Includes 2,805 unvested shares of restricted stock.

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.

Person