## Edgar Filing: KOHLS Corp - Form 4

KOHLS Con	rp										
Form 4											
April 01, 20	15										
FORM	14									PROVAL	
	UNITE	D STATE		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check th if no long							Expires: Janua				
subject to		EMENT O	OF CHAN	F CHANGES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005 verage	
Section	16.			SECUR	ITIES				burden hours per		
Form 4 c Form 5			0 1		a .	· -	1		response	0.5	
obligatio	-						-	e Act of 1934,			
may con	tinue. Section 1		) of the In	•	•	· ·		1935 or Section	n		
See Instr 1(b).	ruction	50(II	) of the m	vestment	Compan	y Ac	101194	ю			
1(0).											
(Print or Type ]	Responses)										
1 Name and	Address of Reporti	na Damon *						5 Deletionship of	Donostino Dos	an(a) to	
BONNING		2. Issuer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
DOMINING	Symbol	S Corp [K	122								
				• -	-			(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				Director	100/	Owner		
N56 W1700		(Month/Day/Year) 03/31/2015				Director 10% Owner X Officer (give title Other (specify					
DRIVE			05/51/2	03/31/2013				below) below) Sr. Executive Vice President			
(Street)				4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
F				nth/Day/Year	)			Applicable Line) _X_ Form filed by One Reporting Person			
MENOMO	NEE							Form filed by M	Iore than One Re		
	I 53051-5660							Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D	Date 2A. Dee	emed	3.	4. Securi	ties A	cauired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yes	on Date, if	1				Securities	Form: Direct			
(Instr. 3)		any Manth	/Day/Year)	Code	(Instr. 3,	4 and	5)	Beneficially	(D) or	Beneficial	
		(Monun/	(Day/Tear)	(Instr. 8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
						(A)		Reported			
						(A) or		Transaction(s)			
				Code V		(D)	Price	(Instr. 3 and 4)			
Common Stock	03/31/2015			F	4,975 (1)	D	\$ 76.62	121,292 <u>(2)</u>	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)

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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)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
F8	Director	10% Owner	Officer	Other				
BONNING KENNETH N56 W17000 RIDGEWOOD MENOMONEE FALLS, WI 5			Sr. Executive Vice President					
Signatures								
(Jason J. Kelroy P.O.A.)	04/01/2015							

<u>\*\*</u>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) Represents shares used to satisfy tax witholding obligation upon vesting of restricted stock under the Company's 2010 Long Term Compensation Plan.
- (2) Includes 63,168 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.