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MANGELL VENUS

Form 4													
October 18, 2										PROVAL			
FORM	4 UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287			
Check thi	is box								Expires:	January 31,			
if no long subject to Section 10 Form 4 or	6.		NERSHIP OF	Estimated average burden hours per response 0.									
Form 5 obligation may conti <i>See</i> Instru 1(b).	inue. Section 17(
(Print or Type R	Responses)												
			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (A	Middle)	KOHLS Corp [KSS] 3. Date of Earliest Transaction					(Check all applicable)					
			(Month/D 10/15/2	nth/Day/Year) 15/2011				X Director 10% Owner X Officer (give title Other (specify below) below) Chairman, President, CEO					
	(Street)			ndment, Da nth/Day/Year	-	l		6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M	One Reporting Pe	rson			
MENOMON FALLS, WI								Person		Porting			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any	n Date, if	3. Transactic Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial			
Common Stock	10/15/2011			F	4,556 (1)	D	\$ 50.45	241,332.37 (2)	D				
Common Stock								138,000	Ι	By family trust (3)			
Common Stock								55,759	Ι	By Trust			
Common Stock								55,759	I	By Trust for Benefit of Spouse (4)			

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Common Stock Common					6,666	I		By S (4) By	Spouse	
Stock					4,628	Ι		•	dren (5)	
Reminder: Report on a separate	e line for each clas	s of securities benefi	Person informa require	s who res ation cont d to resp s a curre	or indirectly. spond to the ained in this ond unless f ntly valid Of	s form are the form	not	SEC 14' (9-0		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
	-	Execution Date, if any		nNumber	6. Date Exerc Expiration Da (Month/Day/ [*]	ate	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
MANSELL KEVIN N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS, WI 53051-5660	Х		Chairman, President, CEO					
Signatures								
(By: Richard D. Schepp P.O.A.) 10/	18/2011							
**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 withholding obligation upon vesting of restricted stock under the Company's Long-Term Compensation Plans.

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- (2) Includes 12,481 unvested performance shares and 151,662.37 unvested restricted shares. In accordance with SEC rules, this number does not include other forms of securities held, such as vested stock options.
- (3) Mr. Mansell is not the trustee or beneficiary of the family trust. He disclaims ownership of the trust's shares for purposes of Section 16 of the Exchange Act and, accordingly, disclaims any obligation to report its transactions.
- (4) This report should not be deemed an admission that the reporting person is the beneficial owner of his spouse's shares for purposes of Section 16 or any other purpose.
- (5) This report should not be deemed an admission that the reporting person is the beneficial owner of his children's shares for purposes of Section 16 or any other purpose.

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.