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SCHUTT D	OUGLAS W										
Form 4											
January 29,											
FORM	Л 4 _{имітер}	STATES	SECU	RITIFS	AND FX	СН	ANGE CO	OMMISSION		OMB APPROVAL	
	UIIILD	SIAILS							OMB Number:	3235-0287	
Check this box if no longer subject to STATEMENT OF				Washington, D.C. 20549 F CHANGES IN BENEFICIAL OWNERSHIP OF					Expires:	January 31,	
									Estimated average		
Section 16.				SECURITIES					burden hours per		
Form 4 Form 5			. .						response 0.5		
obligati							-	Act of 1934,			
may con	ntinue.			•	•	-	ct of 1940	1935 or Section			
<i>See</i> Inst 1(b).	ruction	50(II)	of the I	nvestnen	n compa	11y 21	ct 01 1740	, 			
1(0).											
(Print or Type	Responses)										
1 1 1		D *						5 D L (* 1 * 6 T) (° D		
	Address of Reporting	Person_		er Name ar	d Ticker or Trading 5. Relation Issuer			-	hip of Reporting Person(s) to		
Sellerri			Symbol	OSTCO WHOLESALE CORP JEW [COST]							
								(Check	(Check all applicable)		
(Last)	(First) ((Middle)		of Earliest	Transaction			Director	10%	Owner	
				Month/Dav/Year) —			X_Officer (give titleOther (specify				
999 LAKE	01/29/2013 below)					· · · · · · · · · · · · · · · · · · ·	below) Executive VP				
			4. If Amendment, Date Original				(6. Individual or Joint/Group Filing(Check			
				onth/Day/Ye	-			pplicable Line)			
							-	X_Form filed by One Reporting Person Form filed by More than One Reporting			
ISSAQUA	H, WA 98027						Ī	Person	ne than one Rep	orting	
(City)	(State)	(Zip)	Tal	ble I - Non-	-Derivative	e Secu	rities Acqui	ired, Disposed of,	or Beneficially	y Owned	
1.Title of	2. Transaction Date	2A. Deeme	ed	3.	4. Securit	ies Ac	quired (A) c	or 5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution		TransactiorDisposed of (D)				Securities	Ownership	Indirect	
(Instr. 3)		any (Month/Da	w/Year)	Code (Instr. 8)				Beneficially Owned	Form: Direct (D)	Beneficial Ownership	
		(infonting Du	(j, i cui)	(1150.0)				Following	or Indirect	(Instr. 4)	
						(A)		Reported Transaction(s)	(I) (Instr. 4)		
					. .	or	р.	(Instr. 3 and 4)	(111501.4)		
				Code V	Amount	(D)	Price \$				
Common	01/29/2013			S	20,000	D	φ 102.9629	9 58,547	D		
Stock					.,		<u>(1)</u>	- ,			
							(1)				

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	5. tionNumber of) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code 1	v (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SCHUTT DOUGLAS W 999 LAKE DRIVE ISSAQUAH, WA 98027			Executive VP				
Signatures							
Deanna K. Nakashima, attorney-in-fact		01/29/20	013				
**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).

The price shown is a weighted average sale price for shares sold in multiple transactions; the sale prices ranged from \$102.9500 to

(1) \$102.9950 per share. The reporting person will provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, information regarding the number of shares sold at each price within the range.

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.