## Edgar Filing: GAP INC - Form 4

GAP INC Form 4												
October 01, 2	2015											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL			
Washington, D.C. 20549								N OMB Number:	3235-0287 January 31,			
Check thi if no long subject to Section 1 Form 4 o	6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES										
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									. 0.5			
(Print or Type F	Responses)											
1. Name and Address of Reporting Person <u>*</u> WARRIOR PADMASREE			2. Issuer Name <b>and</b> Ticker or Trading Symbol GAP INC [GPS]			5. Relationship of Reporting Person(s) to Issuer						
(Last)	(First) (	Middle)	3. Date of Earliest Transaction				(Check all applicable)					
TWO FOLSOM ST			(Month/Day/Year) 09/30/2015			_X_Director10% Owner Officer (give titleOther (specify below) below)						
SAN FRAN	05 1205	Filed(Month/Day/Year) Applicable Line) _X_ Form filed b			Joint/Group Filing(Check One Reporting Person More than One Reporting							
							Person					
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned			
	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, -	(A) or 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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Reminder: Rep	ort on a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned directly	or indirectly.					
					inforr requi	nation cont red to resp ays a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)			

## 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. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A) or		

	Derivative Security				Disposed of (D) (Instr. 3, 4, and 5)					
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount of Number of Shares
Dividend Equivalent Rights (1)	\$ 0	09/30/2015	А		111.9481		(2)	(3)	Common Stock	111.948

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director 10% Owner		Officer	Other				
WARRIOR PADMASREE								
TWO FOLSOM ST	Х							
SAN FRANCISCO, CA 94105-1205								
Signatures								
By: Marie Ma, Power of Attorney For Warrior	ree	10/01/2015						
<b>**</b> Signature of Reporting Persor		Date						
<b>Explanation of Respo</b>	nses	:						

- \* 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) Each dividend equivalent right is the economic equivalent of one share of Gap Inc. common stock.

The dividend equivalent rights accrued on stock units originally granted on September 30, 2013 and are immediately vested. Vested

- (2) shares are delivered to the reporting person no sooner than 3 years from the date of grant, unless further deferred, or immediately upon cessation of service as a member of the Board, if earlier.
- (3) Not applicable.

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.