FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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	Check this box if no longer subject
	to Section 16. Form 4 or Form 5
$\cup$	obligations may continue. See
	Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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Name and Address of Reporting Person*     Dillon Mary N							2. Issuer Name <b>and</b> Ticker or Trading Symbol FOOT LOCKER, INC. [FL]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Diffort wary iv															J X	X Director			10% Ov		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 03/28/2023								X	X Officer (give title below)			Other (s	specify			
C/O FO	OT LOCK	KER,	, INC.													President & CEO					
909 DAVIS STREET, SUITE 500					4. If Amendment, Date of Original Filed (Month/Day/Year) 03/28/2023										6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)															X	X Form filed by One Reporting Person					
EVANS	ΓON I	IL	60	0201												Form filed by More than One Reporting Person					
(City)	(	(State	e) (Z	ip)		Rule	e 10	)b5-	1(c)	Trans	sac	tion Ind	icati	ion							
							Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
			Table I	l - No	n-Deriva	tive S	ecui	ities	Acq	uired,	Dis	posed of	, or I	Bene	ficial	ly Owr	ned				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					Execution Date,			Transaction Disposed O Code (Instr. 5)			es Acquired (A) or Of (D) (Instr. 3, 4 a			nd Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or F	rice	Report Transa (Instr.	ted action(s) 3 and 4)					
Common Stock 03/28/20						023				P <sup>(1)</sup>		12,614	A \$		<b>39.7</b> 4	12,614			I	By Trust	
Common Stock 05/30/20					023				P <sup>(2)</sup>		9,525	5 A S		\$26.2	22,139			I	By Trust		
Common Stock																115,388		D			
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)	. Transaction ate Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number		6. Date Exerci Expiration Da (Month/Day/Yo		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		Di Se (li	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
						Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amo or Num of Shar	ber						

## ${\bf Explanation\ of\ Responses:}$

- 1. This Form 4 amends Ms. Dillon's Form 4 filed on March 28, 2023. Ms. Dillon purchased the shares in an open market transaction.
- $2.\ This\ Form\ 4\ amends\ Ms.\ Dillon's\ Form\ 4\ filed\ on\ May\ 30,\ 2023.\ Ms.\ Dillon\ purchased\ the\ shares\ in\ an\ open\ market\ transaction.$

Anthony D. Foti, Attorney-in-Fact for Mary N. Dillon 06/01/2023

\*\* Signature of Reporting Person Date

 $Reminder: \ Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$ 

- $^{\star}$  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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.