Chawla Sona Form 4 March 06, 2019

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

Name and Address of Reporting Person Chawla Sona	Symbol	5. Relationship of Reporting Person(s) to Issuer			
	KOHLS Corp [KSS]	(Check all applicable)			
(Last) (First) (Middle)	3. Date of Earliest Transaction				
	(Month/Day/Year)	Director 10% Owner			
N56 W17000 RIDGEWOOD DRIVE	03/05/2019	X Officer (give title Other (specify below) President			
(Street)	4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
	Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person			
MENOMONEE FALLS, WI 53051		Form filed by More than One Reporting			

1	(City)	(State)	Tabl	e I - Non-E	Derivative (Securi	ities Acqu	iired, Disposed of	, or Beneficiall	y Owned
1.Titl		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactio	4. Securit or(A) or Dis		•	5. Amount of Securities	6. Ownership	7. Nature of Indirect
(Instr	•	(1.101111112 tt)/ 1 011/	any	Code	(Instr. 3,	_		Beneficially	Form: Direct	Beneficial
			(Month/Day/Year)	(Instr. 8)		(A)		Owned Following Reported Transaction(s)	(D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Con	nmon k	03/05/2019		A	29,896 (1)	A	\$ 0	223,976	D	
Con	nmon k	03/05/2019		F	11,795 (2)	D	\$ 66.47	212,181 (3)	D	

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

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SEC 1474

(9-02)

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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.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amoun	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A manuat		
									Amount		
						Date	Expiration		Or Number		
						Exercisable	Date		Number		
				C + V	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

> > President

Chawla Sona

N56 W17000 RIDGEWOOD DRIVE

MENOMONEE FALLS, WI 53051

Signatures

(by Elizabeth McCright, 03/06/2019 P.O.A.)

**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).
- Shares acquired in settlement of performance share units (which were not derivative securities) received under the 2010 Long-Term **(1)** Compensation Plan.
- Stock withheld by Issuer to satisfy tax withholding obligations on shares acquired on March 5, 2019 in settlement of performance share **(2)** units as reflected in Footnote 1.
- (3) Includes 126,130 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.

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