FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMD Number               | 3235-0287 |  |  |  |  |  |  |  |  |
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |  |
| hours per response       | : 0.5     |  |  |  |  |  |  |  |  |

|        | Check this box if no longer subject |
|--------|-------------------------------------|
| $\neg$ | to Section 16. Form 4 or Form 5     |
| J      | 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(b) of the Investment Company Act of 1940

|  |   |                                       |       |   | 01 0                   | ection  | 30(11)   | OI LITE  | ilivesi                                 | unenic             | company Act o  | 1940   |                                  |   |  |   |  |   |   |  |
|--|---|---------------------------------------|-------|---|------------------------|---|----------|--|---|--------------------|--|--|----------------------------------|---|--|---|--|---|---|--|
| 1. Name and Address of Reporting Person* YOUNG DONA D  |   |                                       |       |   |                        | 2. Issuer Name <b>and</b> Ticker or Trading Symbol FOOT LOCKER, INC. [FL] |          |  |   |                    |  |  |                                  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |   |  |   |   |  |
| 10011  |   |                                       |       |   |                        |   |          |  |   | X                  | Direc  |  |                                  | 10% O   |  |   |  |   |   |  |
| (Last) (First) (Middle)  |   |                                       |       |   |                        | 3. Date of Earliest Transaction (Month/Day/Year)                          |          |  |   |                    |  |  |                                  | Officer (give title X Other (specify below)                             |  |   |  |   | specify   |  |
| C/O FOOT LOCKER, INC.  |   |                                       |       |   | 077                    | 07/01/2023  |          |  |   |                    |  |  |                                  | Non-Executive Chair   |  |   |  |   |   |  |
| 330 WEST 34TH STREET   |   |                                       |       |   |                        | 4. If Amendment, Date of Original Filed (Month/Day/Year)                  |          |  |   |                    |  |  |                                  | 6. Individual or Joint/Group Filing (Check Applicable Line)             |  |   |  |   |   |  |
| (Street)   |   |                                       |       |   |                        |   |          |  |   |                    |  |  |                                  |   | Form filed by One Reporting Person                               |   |  |   |   |  |
|  | NEW YORK NY 10001   |                                       |       |   |                        |   |          |  |   |                    |  |  |                                  |   | Form filed by More than One Reporting<br>Person                  |   |  |   |   |  |
| (City)   | Rı  | Rule 10b5-1(c) Transaction Indication |       |   |                        |   |          |  |   |                    |  |  |                                  |   |  |   |  |   |   |  |
|  |   |                                       |       |   |                        |   |          |  |   |                    | ansaction was r<br>ditions of Rule 1                           |  |                                  |   |  | truction or wr  | itten p  | olan that is int  | ended to  |  |
|  |   | Table                                 | 1 - I | Non-Deriva                              | tive                   | Secu  | ritie    | s Ac   | quire                                   | ed, Di             | isposed of   | f, or E  | Benefic                          | cially  | / Owr  | ned   |  |   |   |  |
| Date   |   |                                       |       | 2. Transaction<br>Date<br>(Month/Day/Ye | Execution (ear) if any |   | on Date, |  | 3.<br>Transaction<br>Code (Instr.<br>8) |                    | 4. Securities Acquired (A) o<br>Disposed Of (D) (Instr. 3, 4 a |  |                                  | d 5)  | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following |   | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |   |                                       |       |   |                        |   |          | C  |   | v                  | Amount   | (A) or (D) Price   |                                  |   | Reported<br>Transaction(s)<br>(Instr. 3 and 4)                   |   |  |   |   |  |
| Phantom Stock Units 07/01/2023   |   |                                       |       |   |                        | 3   |          |  | A <sup>(1)(2)</sup>                     |                    | 2,766.5068   | A  | \$27.                            | 11 <sup>(3)</sup>   | 90,155.2801  |   |  | D   |   |  |
| Common Stock   |   |                                       |       |   |                        |   |          |  |   |                    |  |  |                                  |   | 5  | 0,651   |  | I   | By Trust  |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |                                       |       |   |                        |   |          |  |   |                    |  |  |                                  |   |  |   |  |   |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | ive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any |                                       |       |   |                        | Transaction Code (Instr.  |          | 5.<br>Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |   |                    |  | 7. Title<br>Amou<br>Securi<br>Under<br>Deriva<br>Securi<br>(Instr. | nt of<br>ities<br>lying<br>itive | Deri<br>Sec   | Price of<br>ivative<br>curity<br>str. 5)                         | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | у  | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4)                             |  |
|  |   |                                       |       |   | Code                   | Code V (A) (D)  |          | Date<br>Exercisable  |   | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares                             |                                  |   |  |   |  |   |   |  |

## **Explanation of Responses:**

- $1. \ Stock \ distribution \ made \ in \ payment \ of \ the \ stock \ portion \ of \ the \ reporting \ person's \ 2023 \ annual \ retainer.$
- 2. Phantom Stock Units were accrued under the Foot Locker 2007 Stock Incentive Plan, as amended and restated, and are to be settled only in stock following the reporting person's termination of service as a Director.
- $3.\ Value\ of\ consideration\ is\ equal\ to\ the\ closing\ price\ of\ a\ share\ of\ the\ Company's\ common\ stock\ on\ June\ 30,\ 2023.$

Anthony D. Foti, Attorney-in-Fact for Dona D. Young 07/05/2023

\*\* 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.