ROWE JOHN W Form 4 April 23, 2009

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.

Expires: January 31,

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)

| 1. Name and Address of Reporting Person ** ROWE JOHN W | | | 2. Issuer Name and Ticker or Trading Symbol NORTHERN TRUST CORP [NTRS] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--|------------|--|---|-------------|---------------|----------|---|---|------------------|----------|--|
| (Last) (First) (Middle) 50 SOUTH LASALLE STREET | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/21/2009 | | | | | X Director 10% Owner Officer (give title below) Other (specify below) | | | |
| | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person | | | | |
| CHICAGO | | | | | | | Form filed by More than One Reporting Person | | | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-I | Derivative Se | ecuritie | s Acqı | uired, Disposed o | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | any | | n Date, if Transaction(A) or Disposed of (Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8) (A) or | | | | 5. Amount of Securities Ownership Indirect Beneficially Form: Direct Benefic Owned (D) or Owners Following Indirect (I) (Instr. 4 Reported (Instr. 4) Transaction(s) (Instr. 3 and 4) | | | | |
| Common Stock (1) | 04/21/2009 | | | A | 1,424.25 | A | \$0 | 8,647.25 | D | | |
| Common Stock | | | | | | | | 1,000 | I | By Trust | |

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 Derivative | 2. Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. Transacti | 5. orNumber | 6. Date Exerc Expiration D | | 7. Title | | 8. Price of Derivative | 9. Nu Deriv |
|---|------------------------|--|--------------------------------------|-------------------------------|--------------------|----------------|-------------------------------|--------------------|---|--|------------------------|---|
| Security or I (Instr. 3) Prio Den | | or Exercise Price of Derivative Security | (Month/Day/Tear) | any (Month/Day/Year) | Code (Instr. 8) | of | (Month/Day/Year) ve es i | | Underlying Securities (Instr. 3 and | ying ies | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title N | Amount or Number of Shares | | |

Reporting Owners

Relationships Reporting Owner Name / Address 10% Owner Officer Other Director

ROWE JOHN W 50 SOUTH LASALLE STREET X CHICAGO, IL 60603

Signatures

Paul A. Bernacki Attorney-in-Fact for John W.

04/23/2009 Rowe

> **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).
- Represents stock units payable automatically on a 1-for-1 basis in shares of the Corporation's common 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.

Reporting Owners 2