Edgar Filing: Maxwell Scott Marcil - Form 4

| Maxwell Scot Form 4 | t Marcil | | | | | | | | | | | |
|---|---|---------------------|--------------------------------------|--------------------|---|---|--|--|---|-----------|--|--|
| February 28, 2 | 2013 | | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | 3235-0287 | | | | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). StateMent of CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 | | | | | | January 31, Expires: 2005 Estimated average burden hours per response 0.5 | | | | | | |
| (Print or Type Ro | esponses) | | | | | | | | | | | |
| Maxwell Scott Marcil Symbol ExactTan | | | er Name and Ticker or Trading | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | | |
| | | | | tTarget, Inc. [ET] | | | | (Check all applicable) | | | | |
| | | | | 5/2013 | | | | X_ Director10% Owner Officer (give titleOther (specify below)below) | | | | |
| | | | | | ndment, Date Original th/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| INDIANAPO | DLIS, IN 46204 | | | | | | | | More than One Ro | | | |
| (City) | (State) (| Zip) | Table | I - Non-De | erivative S | Securi | ties Ac | quired, Disposed o | of, or Beneficial | lly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution Dates any | Execution Date, if | | 3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| Common Stock | 02/26/2013 | | | Code V A | Amount 6,108 (1) | (D) A | Price \$ 0 | 79,768 | D | | | |

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Securi (Instr. | ınt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|---|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|------------|---------|----------|--|--|--|--|
| reporting of the real of radies | Director | 10% Owner | Officer | Other | | | | |
| Maxwell Scott Marcil 20 NORTH MERIDIAN STREET SUITE 200 INDIANAPOLIS, IN 46204 | X | | | | | | | |
| Signatures | | | | | | | | |
| /s/ Brent D. Mosby, attorney-in-fact Maxwell | for Scott | . M. | 02 | /28/2013 | | | | |
| <u>**</u> Signature of Reporting Pers | | | Date | | | | | |
| Evelopetion of Deep | | ~ - | | | | | | |

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).

(1) Represents restricted stock subject to vesting and forfeiture.

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.