MOULTON PAUL G Form 4/A October 05, 2017

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

SECURITIES

2. Issuer Name and Ticker or Trading

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

Washington, D.C. 20549

January 31, Expires: 2005

0.5

Form 5 obligations STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Estimated average burden hours per

5. Relationship of Reporting Person(s) to

Issuer

displays a currently valid OMB control

response...

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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

MOULTON PAUL G

1. Name and Address of Reporting Person *

MOULTON PAUL G			Symbol COSTCO WHOLESALE CORP /NEW [COST]					(Check all applicable)			
(Last)	(Last) (First) (Middle) 99 LAKE DRIVE		3. Date of Earliest Transaction (Month/Day/Year)					Director 10% Owner Other (specify below)			
(Street) ISSAQUAH, WA 98027			10/02/2017 4. If Amendment, Date Original Filed(Month/Day/Year) 10/03/2017					Executive VP 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivativo	e Secu	rities Acq	uired, Disposed o	of, or Benefici	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deem Execution any (Month/Da	Date, if	3. Transaction Code (Instr. 8)	4. Securion(A) or Di (Instr. 3,	ispose	d of (D) 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	10/02/2017			A	626 (1)	A	\$ 165.89	69,105	D		
Common Stock								3,225	I	Moulton Revocable Trust	
Reminder: Re	eport on a separate lin	e for each cl	ass of sec	urities bene	Perso	ons w	ho respo	ndirectly. Ind to the collected in this form the din this form the din the form the	are not	SEC 1474 (9-02)	

number.

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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	Title Numb of	Number		
				C + V	(A) (D)						
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

MOULTON PAUL G 999 LAKE DRIVE ISSAQUAH, WA 98027

Executive VP

Signatures

Deanna K. Nakashima, attorney-in-fact

10/05/2017

Date

**Signature of Reporting Person

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 additional restricted stock units ("RSUs") resulting from the upward adjustment of unvested RSUs in connection with the special cash dividend paid on May 26, 2017. The adjustment was required under the plan documents governing the grants. The RSUs reported are subject to the same vesting schedules as the RSUs granted in October 2016 subject to performance conditions concerning fiscal 2017, which were deemed satisfied by the Compensation Committee of the Board of Directors.

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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