Edgar Filing: IANNONE JAMIE - Form 4

IANNONE .	JAMIE										
Form 4											
September 0	4, 2012										
FORM	OMB AF	OMB APPROVAL									
		TIES AND EXCHANGE COMMISSION ington, D.C. 20549				OMB Number:	3235-0287				
Check th							Expires:	January 31, 2005			
	Subject to					GES IN BENEFICIAL OWNERSHIP OF					
Section		SECURITIES						Estimated average burden hours per			
Form 4 c Form 5	-			a .	· -			response	0.5		
obligatio	n o *		ection 16(a) of th			•		_			
may con	tinue. Section 1		Public Utility Hol	•	· ·			1			
See Instr	uction	50(II)	of the Investment	Compan	y Ac	ι 01 194	-0				
1(b).											
(Print or Type	Responses)										
	Address of Reportin	ng Person <u>*</u>	2. Issuer Name and	I Ticker or	Tradir	ıg	•	f Reporting Person(s) to			
IANNONE	JAMIE		Symbol				Issuer				
			BARNES & NOBLE INC [BKS]				(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest T	ransaction			(Check	k un uppheuoie)		
	(Mont				Month/Day/Year)				Owner		
	ES & NOBLE,	09/01/2012				XOfficer (give below)	title Other below)	er (specify			
FIFTH AVI	ENUE						Pres., B&	N Digital Prod	ucts		
	(Street)		4. If Amendment, Da	ate Origina	l		6. Individual or Jo	int/Group Filin	g(Check		
	Filed(Month/Day/Yea	Filed(Month/Day/Year)				Applicable Line)					
Form filed by								One Reporting Person Nore than One Reporting			
NEW YOR	K, NY 10011						Person		porting		
(City)	(State)	(Zip)	Table I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction D	Date 2A. Deem		4. Securi			5. Amount of	6. Ownership			
Security	(Month/Day/Yea		n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)				Securities	Form: Direct			
(Instr. 3)		any (Month/D					Beneficially Owned	(D) or Benefic Indirect (I) Owners	Beneficial Ownership		
		(intointil) D	uj, i cui) (insu: 0)				Following	(Instr. 4)	(Instr. 4)		
					(A)		Reported				
					or		Transaction(s) (Instr. 3 and 4)				
G			Code V	Amount	(D)	Price	(insu: 5 und 1)				
Common	09/01/2012		F	4,648	D	\$	140,935	D			
Stock	09/01/2012		1'	(1)	$\boldsymbol{\nu}$	11.97	1+0,755	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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur	unt 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							
	Director	10% Owner	Officer	Other				
IANNONE JAMIE C/O BARNES & NOBLE, INC. 122 FIFTH AVENUE NEW YORK, NY 10011			Pres., B&N Digital Products					
Signatures								
/s/ Eugene V. DeFelice, as Attorney-in-Fact for Jamie Iannone			09/04/2012					
<u>**</u> Signature of Reportin	ig 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).

(1) Shares withheld by the Issuer on vesting of restricted stock to cover applicable withholding taxes.

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.