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FISHER WI Form 4 May 16, 200	ILLIAM SYD	NEY									
									OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287	
Check the if no lon	ner				Expires:	January 31, 2005					
subject t Section Form 4 o	16.	TEMENT O	F CHAN	ERSHIP OF	Estimated average burden hours per response						
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section	17(a) of the	Public U	tility Hol		pany	Act of	Act of 1934, 1935 or Sectior)	1		
(Print or Type	Responses)										
FISHER WILLIAM SYDNEY S			Symbol	er Name an NC [GPS]	d Ticker or T	Trading	5. Relationship of Reporting Person(s) to Issuer				
				of Earliest T	-			(Check all applicable)			
				nth/Day/Year) 2/2005				Director _X_ 10% Owner Officer (give title below) X 00% Owner			
	(Street))4111		endment, D nth/Day/Yea	ate Original r)			6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M	ne Reporting Pe	rson	
							1	Person			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative S	ecurit	ies Acqu	ired, Disposed of	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Execution any	n Date, if	3. Transactio Code (Instr. 8) Code V	4. Securitie oror Disposed (Instr. 3, 4) Amount	d of (È))	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	05/12/2005			S	388,700	D	\$ 21.06	9,095,727	Ι	By trusts	
Common Stock								16,274,116	D		
Common Stock								420,853	Ι	By spouse	
Common Stock								5,000,000	I	By Fisher Core Holdings L.P. ⁽¹⁾	

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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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title Numbe			
					(1) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships					
The forming of the state of the	Director	10% Owner	Officer	Other			
FISHER WILLIAM SYDNEY ONE MARITIME PLAZA, SUITE 1400 SAN FRANCISCO, CA 94111		Х					
Signatures							
Jane Spray, Attorney-in-fact 05/14/20	05						

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).

The reporting person is a general partner of Fisher Core Holdings L.P., a Delaware limited partnership ("Fisher Holdings"), that owns the reported securities. As a general partner of Fisher Holdings, the reporting person may be deemed to have indirect beneficial ownership of

the shares of Common Stock of which Fisher Holdings has beneficial ownership. However, the reporting person disclaims beneficial ownership of all shares of Common Stock held by Fisher Holdings except to the extent of his pecuniary interest therein as set forth on page 1.

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.

**Signature of Reporting Person