Reese Lexi Form 3 November 02, 2018

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

**OMB** Number:

3235-0104

Expires:

January 31, 2005

0.5

Estimated average burden hours per

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**SECURITIES** 

response...

(Print or Type Responses)

1. Name and Address of Reporting Person \* 2. Date of Event

 Reese Lexi (Last)

(First)

Requiring Statement (Month/Day/Year)

11/01/2018

3. Issuer Name and Ticker or Trading Symbol GAP INC [GPS]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

TWO FOLSOM ST

(Street)

(Check all applicable)

\_ Director Officer Other (give title below) (specify below)

Table I - Non-Derivative Securities Beneficially Owned

6. Individual or Joint/Group

10% Owner Filing(Check Applicable Line) \_X\_ Form filed by One Reporting Person

Form filed by More than One

Reporting Person

SAN FRANCISCO, Â CAÂ 94105-1205

(State)

1. Title of Security (Instr. 4)

(City)

(Zip)

(Middle)

2. Amount of Securities Beneficially Owned

(Instr. 4)

Ownership Form:

Direct (D) or Indirect (I) (Instr. 5)

4. Nature of Indirect Beneficial

Ownership (Instr. 5)

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

Conversion or Exercise Price of

Derivative

Security

Ownership Form of Derivative Security:

Direct (D)

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Date Expiration Exercisable Date

Amount or Title Number of Shares

or Indirect (I) (Instr. 5)

## **Reporting Owners**

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other Reese Lexi ÂΧ Â TWO FOLSOM ST SAN FRANCISCO, Â CAÂ 94105-1205

## **Signatures**

By: JoAnne Zinman, Power of Attorney For: Lexi 11/02/2018 Reese \*\*Signature of Reporting Person

## **Explanation of Responses:**

No securities are beneficially owned

- If the form is filed by more than one reporting person, see Instruction 5(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).

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.

Date

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