## Edgar Filing: Lindstrom Allen W - Form 4

| Lindstrom A<br>Form 4<br>April 03, 200  |                     |   |                                |                                |           |   |   |                     |                        |  |
|---|---------------------|---|--------------------------------|--------------------------------|-----------|---|---|---------------------|------------------------|--|
| FORM  | 14                  |   |                                |                                |           |   |   |                     | PPROVAL                |  |
|   | UNITED              | STATES SECU<br>Wa                                       | RITIES A<br>Ishington,         |                                |           | NGE (   | COMMISSION  | OMB<br>Number:      | 3235-0287              |  |
| Check th<br>if no long  | ter.                |   |                                |                                |           |   |   | Expires:            | January 31,            |  |
| subject to  |                     | IENT OF CHAI  |                                |                                | CIA       | LOW   | NERSHIP OF  | Estimated a         | 2005<br>average        |  |
| Section 16. SECURITIES Form 4 or  |                     |   |                                |                                |           |   |   | burden hours per    |                        |  |
| Form 5  |                     | suant to Section  | 16(a) of th                    | e Securit                      | ies E:    | xchang  | e Act of 1934.  | response            | 0.5                    |  |
| obligatio   | ns Section 17(      | a) of the Public U                                      |                                |                                |           |   |   | n                   |                        |  |
| <i>See</i> Instruction 30(h) of the Investment Company Act of 1940  |                     |   |                                |                                |           |   |   |                     |                        |  |
| 1(b).   |                     |   |                                |                                |           |   |   |                     |                        |  |
| (Print or Type I  | Responses)          |   |                                |                                |           |   |   |                     |                        |  |
| (Thit of Type I   | (csponses)          |   |                                |                                |           |   |   |                     |                        |  |
| 1. Name and Address of Reporting Person <sup>*</sup> _ 2. Issuer Name <b>and</b> Ticker or Trading 5. Relat |                     |   |                                |                                |           | 5. Relationship of  | . Relationship of Reporting Person(s) to                    |                     |                        |  |
| Lindstrom A   | Allen W             | Symbol  | Symbol                         |                                |           |   | Issuer  |                     |                        |  |
|   |                     | BARN  | ES & NOI                       | BLE INC                        | [BK       | <b>S</b> ]  | (Check all applicable)                                      |                     |                        |  |
| (Last)  | (First) (M          |   | of Earliest Tr                 | ansaction                      |           |   |   |                     | ,<br>                  |  |
| C/Ο ΡΑΡΝ  | ES & NOBLE, IN      |   | (Month/Day/Year)<br>04/01/2009 |                                |           |   | Director 10% Owner<br>X_ Officer (give title Other (specify |                     |                        |  |
| FIFTH AVE   | C., 122 04/01/2     | +/01/2009   |                                |                                |           | below) below)<br>Vice Pres., Corp. Controller   |   |                     |                        |  |
|   | (Street)            |   |                                |                                |           |   |   | -                   |                        |  |
|   |                     | 4. If Amendment, Date Original<br>Filed(Month/Day/Year) |                                |                                |           | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person |   |                     |                        |  |
|   | T-neu(ind           |   |                                |                                |           |   |   |                     |                        |  |
| NEW YOR   | K, NY 10011         |   |                                |                                |           |   | Form filed by M<br>Person                                   | Iore than One Re    | porting                |  |
| (City)  | (State)             | (Zip) Tak   | ole I - Non-D                  | erivative (                    | Securi    | ties Ace  | quired, Disposed of   | , or Beneficial     | ly Owned               |  |
| 1.Title of  | 2. Transaction Date |   | 3.                             |                                |           |   | 5. Amount of  | 6. Ownership        |                        |  |
| Security<br>(Instr. 3)  |                     | Execution Date, if any                                  | Transacti<br>Code              | on(A) or D<br>(D)              | ispose    | d of  |   | Form: Direct (D) or | Indirect<br>Beneficial |  |
| (1150.5)  |                     |   |                                | (Instr. 8) (Instr. 3, 4 and 5) |           |   | Owned 1   | × /                 | Ownership              |  |
|   |                     |   |                                |                                |           |   | Following<br>Reported                                       | (Instr. 4)          | (Instr. 4)             |  |
|   |                     |   |                                |                                | (A)       |   | Transaction(s)  |                     |                        |  |
|   |                     |   | Code V                         | Amount                         | or<br>(D) | Price   | (Instr. 3 and 4)  |                     |                        |  |
| Common<br>Stock   | 04/01/2009          |   | F                              | 90                             | D         | \$<br>21.7  | 14,702  | 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)

| 1. Title o<br>Derivativ<br>Security<br>(Instr. 3) | e Conversion<br>or Exercise | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | Date               | Amou<br>Unde<br>Secur | le and<br>unt of<br>rlying<br>ities<br>. 3 and 4) | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owno<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|-----------------------------|---|---|---------------------------------------|---|---------------------|--------------------|-----------------------|---|---|--|
|   |                             |   |   | Code V                                | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title                 | Amount<br>or<br>Number<br>of<br>Shares            |   |  |

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## **Reporting Owners**

| Reporting Owner Name / Add   | ress     | Relationships |           |                              |       |  |  |  |  |
|--|----------|---------------|-----------|------------------------------|-------|--|--|--|--|
| I B  |          | rector        | 10% Owner | Officer                      | Other |  |  |  |  |
| Lindstrom Allen W<br>C/O BARNES & NOBLE, I<br>122 FIFTH AVENUE<br>NEW YORK, NY 10011 | NC.      |               |           | Vice Pres., Corp. Controller |       |  |  |  |  |
| Signatures   |          |               |           |                              |       |  |  |  |  |
| /s/ Allen W.<br>Lindstrom  | 04/03/20 | 09            |           |                              |       |  |  |  |  |

\*\*Signature of Reporting 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).

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.