1. Name and Address of Reporting Person

LIU DON H

(Last) (First) (Middle)

1000 NICOLLET MALL

(Street)

MINNEAPOLIS MN 55403

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol

TARGET CORP [ TGT ]

3. Date of Earliest Transaction (Month/Day/Year)

04/06/2021

4. Relationship of Reporting Person(s) to Issuer

X Director

10% Owner

Executive Officer

5. If Amendment, Date of Original Filed

04/06/2021

6. Individual or Joint/Group Filing (Check Applicable Line)

X Form filed by One Reporting Person

Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>2A. Deemed Execution Date, if any (Month/Day/Year)</th>
<th>3. Transaction Code (Instr. 8)</th>
<th>4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>7. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>04/06/2021</td>
<td>A(1)</td>
<td>34,328</td>
<td>A</td>
<td>$0.0000</td>
<td>118,793</td>
<td>D</td>
</tr>
<tr>
<td>Common Stock</td>
<td>04/06/2021</td>
<td>F(2)</td>
<td>15,654</td>
<td>D</td>
<td>$205.17</td>
<td>103,139</td>
<td>D</td>
</tr>
</tbody>
</table>

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Explanation of Responses:

1. Acquired pursuant to the settlement of a performance share unit award granted under the Amended & Restated Target Corporation 2011 Long-Term Incentive Plan.
2. Withholding of stock to satisfy tax withholding obligation on settlement of performance share unit award referenced in footnote (1).

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.